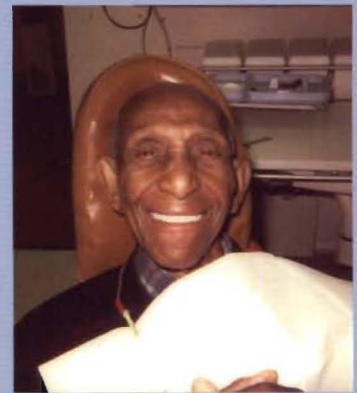




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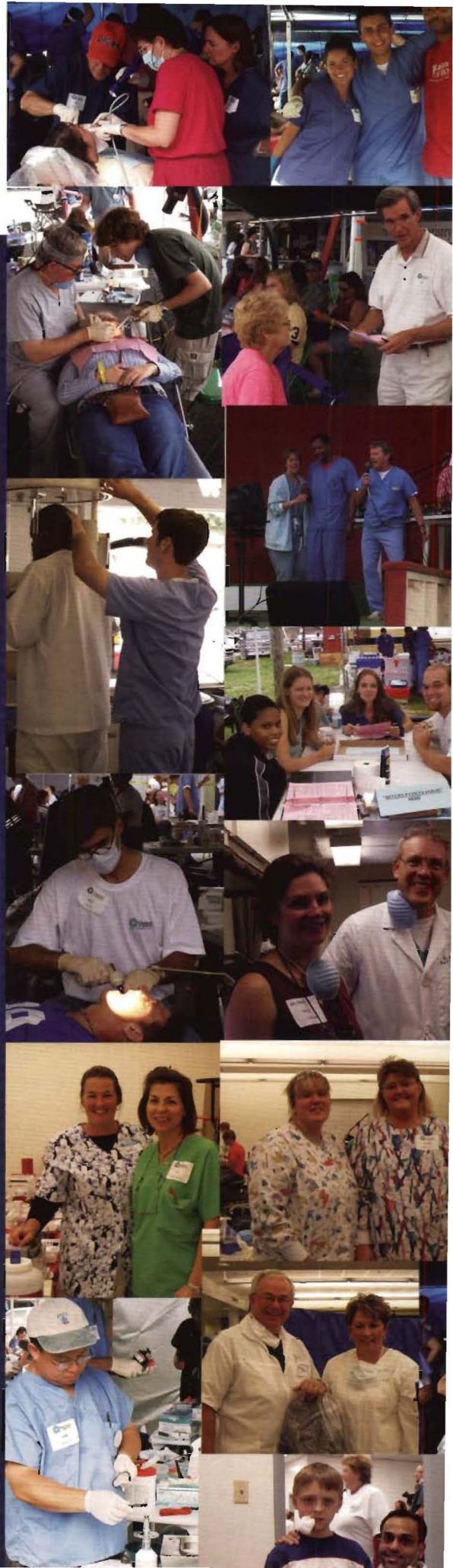


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E-mail: kenny@vadental.org

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From The Editor



Leslie S. Webb, Jr. DDS
VA Dental Journal Editor

The 2005 Virginia General Assembly session was successful for dentistry this year. Credit goes to our lobbyist, Chuck Duval, our Executive Director, Terry Dickinson, our Director of Public Policy, Emily Ward, and all of our members who provided liaison contact to their legislators. Licensure by credentials, which includes stringent criteria, passed, as did a 16.7 million dollar budget increase in dental medicaid funding. Also, the current dental assignment of benefits law was not altered.

Now that this session of the legislature is history, it is time to remember that in November, Virginians will elect a new Governor, Lieutenant Governor, Attorney General and all 100 delegates in the House of Delegates. Our members need to establish relationships

with all the candidates irrespective of party affiliation. This can be done by volunteering in campaigns, by organizing or participating in fund raising events, or by making a contribution to a candidate's campaign. We will need the support and votes of our newly elected officials in future General Assembly sessions and with regulatory issues. The campaigns give us a chance to get to know the candidate and him/her a chance to get to know us. Now is a great opportunity to position ourselves to become active advocates for dentistry in the legislative process.

Guest Editorial

Submitted By Dr. D.K. Wilson

TRUST, COMPETITION AND RISK

From the new graduate to the old fogey (me), we're a pretty diverse group. Dentistry takes pride in being inclusive: both genders, variegated ethnicities, geographic locales, even political preferences. We have so many differences, personalities and opinions – and yet we all seem to share one common denominator: unquestioning trust of those who advertise and promote our dental products.

I recently attended a course sponsored by an (unmentioned) internationally known commercial product company. The course was somewhat expensive. The speakers – all articulate and persuasive advocates of the company's product – were informative

and enthusiastic. It was evident that the objective was to entice those of us in the audience to purchase that product.

As I left, I was in awe at the audacity (successful audacity at that) of the company. They had charged each of us a substantial amount of our hard-earned money to listen to what amounted to a sales pitch. Equally amazing, I joined my colleagues lines up outside that lecture room (like a bunch of sheep) to purchase this product. I'm certain that the product is beneficial for patients and contributes to effective oral health care.

Well – maybe NOT so certain:

Those of us who engage in implantology must have a zillion outdated (and very expensive) paraphernalia up in our closets. I am embarrassed to mention that I have a Stuart Artic-

ulator, a Pontostructor, an automatic amalgam condenser and a fascinating array of 1960's blade implants in my attic. (In case anyone is interested in purchasing any of these, my phone number is).

How many "old generation" adhesive dentistry products do we have in the back of cabinets? I chatted with a product salesperson about this some weeks ago and he -correctly – reminded me that his company would be pleased to take back any product we were unhappy with. Unfortunately, by the time we realize (18-24 months later) that the product didn't meet the promise; a new "generation" is on the market. Companies are understandably reluctant to accept products for credit returns that are two or three years old. So, we swallow hard and chalk it up to the cost of doing business.

Dentists are very generous people. Every one of us accepted our calling to provide the best dental care to our fellow citizens. We all give. Daily we strive to do our best and provide treatment that helps others live healthier, more productive and happy lives, free of pain and discomfort. We provide others with smiles that they can be proud to show and not be embarrassed by. And all of us give to those in need. A patient walks into your office and is in pain. You relieve that pain, sometimes knowing you'll never even get paid. But that's who we are. That's the kind of people we are. Don't get me wrong. We can't just give away our services or soon we'll be bankrupt and out of business, no longer able to help anyone. But sometimes, in accepting our responsibility to society, we give our services away because it's the right thing to do.

The Virginia Dental Association recognizes that dentists are like this. We don't ask for a pat on the back or any special recognition, we just do the right thing, for the right reason. We all know that we do it, but no one else does. The general consensus of the public is that we are Mercedes driving, latte sipping, Wall Street Journal reading elitists who have more money than we know what to do with and really don't care much about anyone else. You've heard it from your patients. Your fees are too high and you make way too much money. "Where are you going on vacation with all this money I'm paying you for this crown, bridge, or root canal?" We've all heard it. But we understand that's not who we are. How do we change that perception? I really believe if the public were to walk in our shoes, they would understand. Do they have any idea what we actually give away each year? No they don't. We don't brag about it or publicize it, we just do it. Again, it's the right thing to do.

This issue of the Journal focuses on

the programs the VDA has that help dispel these myths and help to show the public who we are. The MOM projects, DDS Program, free clinics, and Give Kids a Smile all help to show who we are and what we do to help our fellow citizens in need. They are a way to quantify and show off what is done every day in every dental office. To date, the 15 MOM Projects have provided dental care for over 12,000 patients with an estimated value of 4.3 million dollars. The DDS Program has provided care to over 11,000 patients with an estimated value of over 3 million dollars. And the Give Kids a Smile Programs in the last two years have provided examinations, sealants, oral hygiene instructions and prophylaxis for over 5,000 children. There are approximately 28 clinics in Virginia that provide dental care to those in need. One clinic in Northern Virginia provides almost 5000 patient visits per year serving over 1500 patients with an estimated value of 1.4 million dollars per year. These statistics are incredible! All of this is dental care that Virginians would not have received if it were not for the generosity of Virginia dentists. And this is only what we have measured in formal programs sponsored by the VDA.

These statistics make it easier for the VDA to approach legislators and show them that we are doing our share. Access to care is the current buzz word in politics. We are demonstrating our ability to provide access to care for those in need by sponsoring and working in these programs. It makes it easy to show that we care and that we do our part. It really brings to attention the fact that we are good people and we are very generous. I encourage each of you to find some time to donate to at least one of these programs. You will find the experience very fulfilling and rewarding. At the MOM and Give Kids a Smile programs, you will get the



**Bruce R. Hutchison, DDS
VDA President**

opportunity to work with colleagues and share your stories. Most of us work in individual practices or small groups and seldom get the opportunity to work side by side with other dentists. Working through the DDS Program or at one of the free clinics throughout the state gives you an opportunity to work either in the comfort of your own office or in a clinic space nearby. These patients need our help and seeing the smiles on their faces is a huge reward.

It feels good to be a part of an organization and a profession that has a heart as big as ours. We don't just fill holes in teeth, we often fill holes in the hearts of people with little hope and few dreams. Sometimes life's biggest rewards are smiles and hugs from someone in need who you have helped with the skills and talents you possess. Share what you have. It's the right thing to do.

Bruce R. Hutchison, DDS
President, Virginia Dental Association

Continued From Page 4

Let's agree that progress is expensive. Those of us who are doing everything today the same way we did five-seven years ago may well be mistreating some patients. So we all try to keep up, be contemporary and care for our patients with the latest and the best (at least, we hope it's the best).

However, your and I might question, "Why does progress always have to be tested/evaluated on our patients? Could it possibly be that some (clearly not all) companies are a little hasty in getting a new product to market?" Competition is fierce but the "early bird gets the worm" is a culture full of risk. Sadly, practicing dentists and their patients are the ones who are accepting that risk.

When products don't do well and the dentist and patient not only confront

the replacement of a restoration, but also endodontic and full coverage treatment (or worse), is there not a moral issue here?

Now about VIOXX.....

Alert From The ADA!

We've heard from a few societies that dentists are receiving invoices from "Dentists.Org" for an Internet advertising listing. The invoices include claims that the ads are being visited heavily and bill the dentists \$29.95. The dentists apparently never registered with Dentists.Org and are being billed inappropriately. If you have instances of this practice, please share with Earl Sewell (2499, sewelle@ada.org) so we can determine if any action is necessary.

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Tips to Help You Understand and Appeal Health Plan Decisions When the Coverage is Self-Insured

From the Virginia SCC website

If your coverage for health care is provided through your employer, it is very important to know if the coverage is self-insured or fully-insured. If the coverage is fully-insured, the Virginia Bureau of Insurance or other state insurance department may address any problems that you have. If the coverage is self-insured, then problems will need to be addressed by the Department of Labor (DOL), an agency of the federal government. The following information will help you determine if your coverage is fully-insured or self-insured.

KEY TERMS YOU SHOULD KNOW

Managed Care Health Insurance plan (MCHIP) – a health carrier, such as a Health Maintenance Organization (HMO) or a Preferred Provider Organization (PPO), that designs arrangements to provide covered services in an efficient and cost-effective manner, to help control the cost of your coverage.

Group Health Insurance – health insurance provided by an employer to employees and in some cases family members, and paid for by the employer, the employees, or both; coverage may be through an MCHIP or other type of health insurance.

Fully-insured – group health insurance where an employer pays a premium to an MCHIP or other insurer and in return, the MCHIP or insurer assumes the financial risk of paying claims. There is an insurance contract between the employer and the MCHIP or other insurer.

Self-insured – group coverage where

the employer acts as its own insurer, and uses an MCHIP, “insurer”, or administrator to administer the plan: establish a provider network, process claim payments, and conduct other tasks necessary to run the plan. There is no insurance contract between the employer and the administrator because the employer bears the risk for payment of claims.

ERISA – Employee Retirement Income Security Act that Congress passed in 1974 that provides exclusive federal jurisdiction over single employer benefit plans, including self-insured plans.

DOL – U.S. Department of Labor, part of the federal government and responsible for ensuring employers comply with ERISA.

To determine if your health care coverage is fully-insured or self-insured, check with the Benefits Administrator or Plan Administrator in your employer’s Human Resource office. You may also find clues in documents provided by the plan in any language that states the plan is only acting as an administrator or providing “administrative services only” to the employer.

Large companies frequently self-insure for a variety of reasons, including consideration of the costs involved. Some large companies offer both self-insured and fully-insured coverage, so be sure to check for your specific coverage.

If you have a dispute with a self-insured plan, state regulatory agencies like the Bureau of Insurance will not

A Message From The Virginia Office Of The Managed Care Ombudsman

Are you and your patients having problems with managed care plans? If so, did you know that the State Corporation Commission’s Bureau of Insurance has an office that provides assistance? The Office of the Managed Care Ombudsman, established by the General Assembly in 1999, can provide general information and assistance, and formally help a patient through the appeal process with their Managed Care Health Insurance Plan (MCHIP).

The Ombudsman provides general information on managed care and how it works, and informally responds to inquiries from patients. If a patient requires formal assistance in the appeal process, the Ombudsman’s office will help the patient navigate the internal appeal process and ensure the individual has the opportunity to exercise their appeal rights.

The Ombudsman can only assist individuals whose coverage is issued under an individual or fully-insured group health plan issued in Virginia, which excludes government health plans and self-insured plans. The staff can help providers and patients determine how the coverage is structured and if the coverage isn’t fully-insured, make a referral to another agency.

To learn more about the Office of the Managed Care Ombudsman, visit their web page at www.scc.virginia.gov, (click on Consumer Info), send an e-mail to ombudsman@scc.virginia.gov or call the office at 877-310-6560.

Abstracts Of Interest

The following abstracts were provided by the Department of Pediatric Dentistry at VCU School of Dentistry. We appreciate the contribution that these individuals have made to the *Virginia Dental Journal*.

Krista Baier, BSc, MDM, MSD, Peter Milgrom, DDS, Stephen Russell, BSc, Lloyd Mancl, PhD, Toshiko Yoshida, PhD. Children's Fear and Behavior in Private Pediatric Dentistry Practices. Pediatric Dentistry 26:4, 2004 pp316-321

The etiology of dental fear is multifactorial. Research reports that 6%-22% of children have dental fear. This dental fear can be attributed to previous painful dental experiences, increased general fears, and maternal fear. Girls and younger children tend to have more reported fear than boys and older children.

This study assessed the proportion of children with dental fear, the proportion of children with negative behavior and the relationship of children's dental fear and children's negative behavior in private dentistry practices in western Washington State.

A total of 421 children seen in 21 private pediatric dentistry practices in western Washington State participated. The average age of the children was 6.8 +/- 2.8 years (range=0.8-12.8 years). An average of 21 children were studied per practice (range=7-25 children). Dental fear was measured using the parents' version of the Dental Subscale of the Child Fear Survey Schedule (CFS). Behavior was rated using the Frankl Scale. Data was collected regarding the child's previous experiences and parental fear.

The Frankl Scale consists of 4 behavior categories: (1) definitely negative; (2) negative; (3) positive; (4) definitely positive. Definitely negative is defined as refusal of treatment, crying forcefully, fearful, or other signs of extreme negativism. Negative is defined as reluctance to accept treatment, uncooperative, and

some evidence of negative attitude but not pronounced (ie, withdrawn). Positive is defined as acceptance of treatment, occasional cautious behavior, willingness to comply with the dentist, and occasional reservations but willingness to follow the dentist's directions cooperatively. Definitely positive is good rapport with the dentist, interest in dental procedures, and laughing and enjoying the experience.

Multifactorial logistical regression analysis showed children with dental fear, younger children, and children exposed to treatment involving local anesthesia have higher odds of displaying negative behavior.

This cross-sectional study of a convenience sample reports that 20% of children in private pediatric dentistry practices had dental fear. The proportion of children with negative behavior during treatment was 21%. Children who displayed negative behavior had greater odds of having dental fear and children with dental fear had greater odds of having negative behavior. Screening for dental fear may allow pediatric dentists to prepare children more adequately for positive treatment experiences.

Dr. Jennifer Dixon is a second year advanced education student in Pediatric Dentistry at VCU School of dentistry. She received her DDS from Virginia Commonwealth University, School of Dentistry in 2003.

Lee-Kim SJ, Fadavi S, Punwani I, Korber A. Nasal Versus Oral Midazolam Sedation for Pediatric Dental Patients. Journal of Dentistry for Children 71:2, 2004 pp126-130

Midazolam is a safe and efficacious drug option for sedation of pediatric dental patients. Midazolam can be administered through intramuscular, intravenous, rectal, oral and intranasal routes. The major advantage of the intranasal route is rapid absorption through bypassing first pass metabolism. Another advantage over the oral route is that children cannot spit out medications

given nasally. The aim of this study was to evaluate and compare intranasal and oral midazolam for effect on behavior, time of onset, maximum working time, efficacy, and safety for patients requiring dental care.

Forty anxious children were randomly sorted into nasal and oral sedation groups of twenty each. Midazolam was administered at a dose of 0.3mg/kg nasally, and 0.7mg/kg orally. Sedation dental procedures were then videotaped and rated by blinded and calibrated evaluators using Houpt's behavior rating scale for sleep, movement, crying, and overall behavior.

Upon comparison of the two sedation routes, the mean onset time of intranasal sedation was three times faster than oral administration. However, the mean working time for the oral route was ten minutes longer than the nasal route. Results of overall behavior were similar between the two groups, with more movement and less sleep in the intranasal subjects.

Dr. Annelise C Hardin is a first year advanced education student in Pediatric Dentistry at VCU School of Dentistry. She received her DDS from the University of North Carolina at Chapel Hill, School of Dentistry in May of 2004.

S.M. Nainar and S. M.ohummed. Diet Counseling During the Infant Oral Health Visit. Pediatric Dentistry. 26:5, 2004.

This article presents a summary of diet counseling for the infant's oral health visit. The primary emphasis of dietary instruction is placed on sugar intake frequency, but other infant-specific dietary concerns are also addressed. At the initial examination and at every subsequent recall appointment, the role of refined carbohydrates and the impact of snacking frequently should be discussed. The initial oral evaluation should be scheduled 6 months after the eruption of the first primary tooth or by 1 year of age.

The American Academy of Pediatrics (AAP) recommends breast-feeding as the ideal method of infant feeding for the first 6 months followed by the addition of iron-enriched solid foods between 6 and 12 months. The AAPD (American Academy of Pediatric Dentistry) suggest, "ad libitum nocturnal breast-feeding should be avoided after the first primary tooth erupts." Only 1 in 4 U.S. infants is breast-fed at 6 months of age. Infant formulas are acidogenic and possess cariogenic potential. Parents need to be informed of the need for good oral hygiene practices upon the 1st primary tooth's eruption. Parents should be counseled against putting babies to sleep with a bottle.

The AAPD suggest infants should begin drinking from a cup as they approach their first birthday and be weaned from the bottle at 12 to 14 months of age. The AAP also recommends not giving infants juice in bottles or easily transportable covered cups (sippy cups) that enable juice consumption throughout the day. Infants should not be given juice at bedtime.

The AAP suggests that infants should consume only 4 to 6 oz of fruit juice per day. Infants should be encouraged to consume mashed or pureed whole fruits. The possibility of sugars being added to consumer products must be investigated. The AAP cautions that "fruit juice offers no nutritional benefit for infants younger than 6 mos. Malnutrition may be associated w/ excessive fruit juice consumption. 9 out of 10 children have consumed fruit juices by 1 year of age. Dietary fluoride supplements should not be prescribed for infants under the age of 6 months. An infant's exposure to fluoride should be determined based on access to fluoridated water in the community water supply or through water analysis for those drinking well water. Infants with access to fluoridated water but whose families supply bottled water should be reviewed for possible supplementation. For infants older than 6 months of age exposed to water with 0.3ppm fluoride, dietary fluoride supplements of 0.25mg per day should be prescribed.

The AAP suggests infants should be exposed to solid foods at 6 months of age (iron-fortified cereals and pureed meats). Iron-fortified cereals should be given with breast milk or infant formula as cow's milk should be avoided during the first year of life. Cow's milk should be limited to 24oz during the second year of life. Parents should also be counseled on foods that constitute choking hazards for infants. There have been reports of aspiration of fruit-flavored gel snacks. Infants should not be given nuts, sunflower seeds, watermelon with seeds, cherries with pits, raw carrots, raw peas, raw celery, popcorn, or hard candy. The AAPD 2004-05 Oral Health Policies and Clinical Guidelines are posted on the website: <http://www.aapd.org/>

Dr. Kate M. Roberts is a first year advanced education student in Pediatric Dentistry at VCU School of Dentistry. She received her D.D.S. from VCU School of Dentistry in May 2001.

Ari Kupietzky, DMD MSc, William F. Waggoner DDS, MS. Parental Satisfaction With Bonded Resin Composite Strip Crowns for Primary Incisors. Pediatric Dentistry 26:4, 2004 pp 337-340

Bonded resin composite strip crowns have been used as an alternative to stainless steel crowns for primary incisors for better esthetics. It is the use of prefabricated cellulose matrix and bonded resin composite to restore primary incisors with large or multi-surface caries.

The aim of this study was to evaluate parental satisfaction of bonded resin composite strip crowns for the treatment of maxillary anterior primary incisors and compare their satisfaction with the clinical evaluation and success of the crowns.

This study was designed as a retrospective clinical study that included 112 restorations on 40 healthy middle-class and upper-class preschool children. The restorations were evaluated after the crowns had been in place for an average of 18 months. Parents completed a satisfaction questionnaire survey and 2 independent

pediatric dentists evaluated color, crown contour, and retention (durability).

Overall parental satisfaction with the treatment was excellent; however, satisfaction with regard to color received the lowest rating. No significant difference was found between dentist and parent evaluation of color, size, and overall appearance. Parents who gave poor rating to durability also rated their overall satisfaction as being poor.

This study concluded that parental satisfaction with this type of bonded resin composite for treatment of primary anterior incisors with large or multi-surface caries was excellent. Parent dissatisfaction was most often related to the color of the restoration. This however did not affect their overall satisfaction.

Dr. Arshia Shingler is a second year advanced education student in Pediatric Dentistry at VCU School of dentistry. She received her DDS from Virginia Commonwealth University, School of Dentistry in 2003.



Dr. Terry Dickinson, VDA Executive Director and Bill Hall, M.O.M. Volunteer and Benco Employee accept a \$5,000 donation to the Mission of Mercy Project at an October 2004 Benco Blast event.

VDA Member Receives Award



VDA Member, Dr. Jeffery Levin to Receive Distinguished Community Service Award

Long-time communal leader, Dr. Jeffery Levin, will receive the highest award given by the Richmond Jewish Community, the Distinguished Community Service Award, at the JCFR annual meeting on June 3.

Levin has been an active leader in many local, national and international Jewish medical and other organizations for more than 30 years.

He was one of the first American dentists to voluntarily participate in a special program to treat terror victims at the Hebrew University Hadassah School of Dental Medicine.

The program, "Smiles in Spite of Terror," was initiated in late 2002 to provide terror victims with full dental treatment free of charge.

He has received a number of honors, including the William B. Thalhimier Young Leadership Award, the 2002 Distinguished Community Service Award from the Maimonides Society of Richmond, the Chesed Award for Outstanding Community Service in 2001 from the Rudlin Torah Academy,

the Lion of Judah Award for the State of Israel Bonds, Certificate of Achievement and The Heritage Awards for the American Red Magen David for Israel Emergency Services and the JCFR Distinguished Campaign Award.

He is a past board member of the JCC, JFS, and Beth Sholom Home and currently on the board and executive committee at the JCFR. He also serves on the executive committee and advisory board of the Federation's Jewish Community Relations Committee.

He is a past vice chairmen of the UJA/Jewish Welfare Fund Campaign, past co-chairmen of the Israel "50" Celebration and a past Israel Mission Chairmen for JCFR.

Levin, who also serves on the faculty of Virginia Commonwealth University, broadened his involvement in Israel in 2002 by presenting several lectures to dental school faculty and students, demonstrating his points with equipment he brought especially from the United States.

He and his wife, Bobbie, are members of the Hadassah's Golden Wreath Society of Major Donors. He is fundraising vice president of Hadassah Associates, the male affiliates of Hadassah, the Women's Zionist Organization of America.

He is a native of New York City and served in the U.S. Army from 1968 to 1970 as a captain with the Dental Corps. Levin received an undergraduate degree in psychology from Emory University and a Doctor of Dental Surgery from the School of Dentistry, Medical College of Virginia.

Re-printed from press release available at www.jewishrichmond.org.



VDA Legislative Day On The Hill

Contributed By: Emily Ward

THANK YOU to all of those who attended the January 21, VDA Legislative Day on the Hill. Dentists and dental students attended breakfast at the Omni in downtown Richmond, followed by legislator appointments at the Capitol. The VDA members informed legislators of issues that affect dentistry now and in the future.

Also, a sincere thank you to members of the VDA Alliance, who created and distributed dental gift bags to General Assembly members, their staff, as well as the Governor's Office and his staff.

Your support of VDA's legislative efforts is greatly appreciated!

Do You Know An Award Winning VDA Dentist?

If You Know Of Any VDA member who has recently won an award in dentistry, or has been recognized as an outstanding member of his community, please contact the VDA main office at (804) 261-1610. The VDA is proud to recognize all those among our members who continuously strive to share their leadership and talent to serve the dental profession in Virginia!

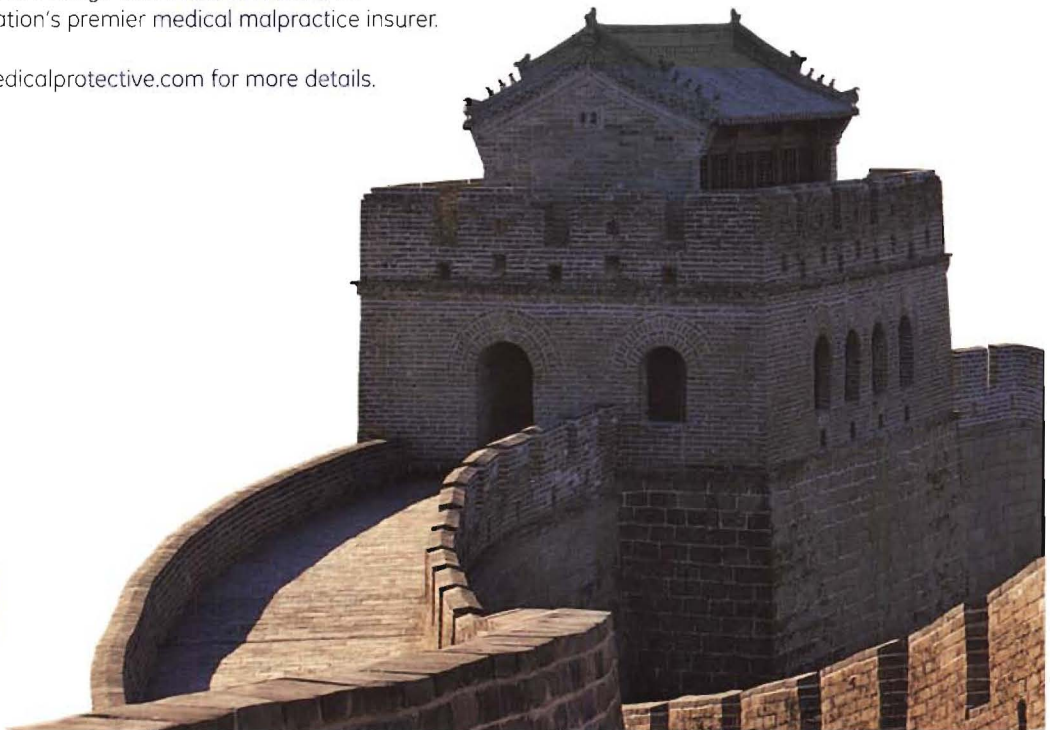
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Plan on Living a Long Life? What's Your Plan?

**By: Maria A. Glezos, CLTC, Long Term Care Specialist
B&B Insurance Associates, Inc.**

Medical science has greatly advanced the longevity of our lives. As a result, proper planning for the future is imperative because the longer we live - the greater our chances of needing some form of long term care are down the road. Planning for this in peak earning years while healthy and actively saving for retirement is crucial.

Long term care is the number one underinsured risk Americans face today. The cost of care in our area averages approximately \$65,000.00 per year for nursing home care and approximately \$40,000.00 per year for home based care. Assisted living is in between the two averages. By far, the fastest growing form of long term care is home based care which allows you to live at home and maintain your quality of life and independence.

Paying for long term care out of pocket can quickly exhaust retirement resources and interrupt wealth preservation plans, which often focus on leaving assets for beneficiaries such as children or grandchildren. Realistically, only 5-7% of the population has the financial means to afford to pay for long term care out of pocket if the risk management is not pre-established and in place in the retirement portfolio.

Not only is the potential financial impact devastating if a plan is not in place for long term care, but more deeply devastating are the emotional consequences to loved ones who are left to take care of a spouse, parent or relative in need with no long term care insurance. The physical and emotional toll that it takes on an individual or family who needs to take care of someone with long term care needs is incomprehensible.

The most important way you can manage these risks while protecting your family and retirement portfolio is by purchasing a long term care insurance policy. Long term care insurance is a critical component to any retirement plan. Your health plays an important factor in being approved

for this type of insurance policy so it's important to research options when you are healthy.

Those aged 40 and older should begin researching options that exist to help properly plan for the future. You could wait to purchase until later years but insurance carriers implement significant rate increases for future buyers every 2-3 years. Also, your health status may change and your age increases each year and all these factors impact the premium you would pay - so you are gaining nothing by waiting and you are only hedging your bets as it will likely cost you significantly more to purchase it in the future - if you can even qualify at all if health status changes.

Long term care insurance will pay for long term care needs as a result of illness, accident or cognitive impairment. This type of insurance will cover critical areas such as home based care, assisted living, and/or nursing home. Many assisted living facilities that are being built today have extended care medical units so most individuals will never need to step foot in an actual nursing home.

What if the need for long term care surfaced before retirement? Could you afford to pay for the cost of long term care out-of-pocket if you suddenly required it? Approximately 39% of those utilizing long term care, in some form, are under the age of 65. This could be as a result of a car accident, sudden illness, sports injury to name a few. Disability only replaces a portion of your income (usually around 60%) but will not pay for care. Health insurance does not pay for long term care either. Medicare will pay for up to 100 days provided you are receiving skilled care and are getting better. Statistically nationwide they are paying on an average of only 30 days.

Many states and the Federal Government are providing tax breaks for those who choose to purchase a long term care policy. The reason these tax breaks exist is because the federal and state governments recognize that there is nothing in place to pro-

vide long term care for Americans outside of Medicaid - which essentially requires essentially all of your assets be depleted before qualifying and is not going to be able to cover long term care for millions of Americans. Home based services and assisted living - do not have to accept a penny of Medicaid - and most don't - so your only choice when on Medicaid is a Medicaid nursing home which is what most people are trying to avoid in the first place.

Proper policy design is imperative to any long term care insurance policy. Working with the right, top rated carrier is imperative. Top rated carriers are the only form of protecting yourself against future rate increases. There is never a guarantee but none of the top rated carriers have had a rate increase for existing clients yet.

It's also important to work with an expert in the field. Bad advice given today can create a huge negative impact for you in the future because of misinformation given to you by an individual not well informed in this area. Changes cannot be made to an existing long term care policy once it has been issued and is past the 30 day free look period. Certain components can be changed but will be very costly and cannot be done if health status has changed since the policy was issued.

Your retirement portfolio is more than likely based upon living into your 80's or 90's so it's important to start the process now of putting together a plan for potential long term care needs for both you and your spouse that folds into and protects your retirement portfolio and your family as well.

We can't predict but we can prepare. Proper planning is the key to peace of mind for you and your family. As Rosalynn Carter, former First Lady, has once said, "There are only four kinds of people in this world. Those who have been caregivers; those who are caregivers; those who will be caregivers and those who will need caregivers." Don't let your plans for a long life go without a plan. What is your plan? If you do not have long term care insurance in your retirement portfolio you could be opening the door for some financially and emotionally devastating consequences to your assets and your family.

Important DR Announcement:

Effective March 1, 2005 James C. Nordt Company, Inc. of Roanoke will adopt a Dental Direct Assignment Plan for its 130 employees. Nordt manufactures jewelry, particularly rings. This is the first Direct Assignment plan in the Roanoke area and we are excited to bring these fee-for-service patients to our members in the region. For dentists in the area, please be certain that your staff is advised that patients may be asking if your office accepts **Direct Assignment**, and your answer should be a resounding "YES!" Direct Assignment, like Direct Reimbursement is a dental benefit wherein dentists and patients can determine an appropriate treatment plan together, without the interference of a third party. For Nordt employees, advise your staff to follow the simple instructions on the back of their DA cards. You will submit a simple form to Benefits Administration, Inc. and you will receive reimbursement promptly. Patients are responsible to pay at the time of service their portion of the cost. There are no restrictions for treatment under this plan (except cosmetic), and no procedure pre-authorization is required.

A sample benefit card is shown below for your reference. This card is similar to those used statewide by companies with Direct Reimbursement and Direct Assignment Plans.

<p>John C. Nordt Co., Inc Dental Direct Assignment & Direct Reimbursement Plan</p> <hr style="border: 1px solid black;"/> <p>Annual Plan Year March-February</p> <p>Benefits First \$200 of expense is reimbursed at 100% Then \$50 individual/\$150 family deductible applied Then next \$200 is reimbursed at 80% Then 50% to the annual maximum \$1,000 per person</p> <p>Participant Name</p>
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(Front)

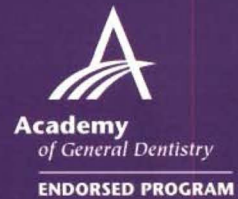
<p>Instructions to Dental Providers</p> <hr style="border: 1px solid black;"/> <p>Do not send x-rays or pre-estimates. There are no exceptions on preventative care visits or exclusion of services provided by a licensed Dentist, except cosmetic services. Submit by mail or fax an attending dentist statement with the complete name, address, and Federal Tax ID number of the dentist providing the service.</p> <p>Benefits Administration, Inc. 11512 Allecingie Parkway, Suite D Richmond, VA 23235 Phone (804) 378-6206 or (800) 945-1836 Fax (804) 379-3509 www.benefitsadmin.net</p>

(Back)

If you have any questions about Direct Assignment and Direct Reimbursement plans, please contact Elise Woodling at the VDA at 800-552-3886

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VDAJ-P405

Are Your Dental Charts Working Against You?

By. Jeffery J. Tonner, J.D.

One out of every six U.S. dentists will become entangled in a dental-legal matter this year alone. This irritant could include a civil malpractice lawsuit, dental board complaint, and/or damage claim against your insurer.

When the time comes, and it will happen, your best defense or worst nightmare will be the dental record. With proper documentation, a claim either will not be filed at all or can be dismissed with minimal involvement. The overriding concern is balancing your valuable clinical time against the tedium of excessive record keeping. While no dentist ever got rich charting, some practitioners come to regret recording only minimal information.

Defending hundreds of dentists, I have discovered a major record keeping flaw. Many practitioners record only adverse findings. For example, in and initial patient examination a clinician analyzes numerous areas. These assessments, however, often are recorded using a single acronym "CDE" [Comprehensive Dental Exam]. When pressed to prove that, say an oral cancer screen or periodontal screening was performed, the dentist must "extrapolate from the negative." In other words, the test was performed and found to be within normal limits; otherwise, it would have been noted. While this methodology worked years ago, today's jurors and fact finders are more demanding. If it is not written in the record it didn't happen. Your dental chart can become a powerful ally, but only if it cues a response for necessary information.

Returning to the initial examination, ten clinical areas ideally should be addressed. You could train yourself or the staff to record each item in

the progress notes, or use a form that prompts an answer. In the illustrated Initial Oral Examination sheet, each treatment category is listed with options. By circling or checking the appropriate information, your record is complete in a matter of second. Here are some additional areas where charts can enhance your record keeping:

The Health History can ask patients:

- To inform the staff of any changes in their medical or dental conditions since the last office visit (you should inquire too)
- The name of their previous dentist (a future information source, if needed)
- Whether they are currently in pain

• If they ever had problems with other dental treatment or practitioners (insight into whether or you wish to accept them as patients or terminate)

• To list their current over-the-counter drugs (medically conservative; new age, hypochondriacal)

The Clinical Exam and Treatment Plan sheet can remind the staff to include the:

• Existing clinical condition (restorations, root canal treatments, missing teeth and crowns,bridges)

• Diagnosis/pathology to support any proposed treatment)by far, the most missed element in charting!)

• Treatment options

• Difference between immediate

treatment needs and future services (discussed below)

The Consent Form for Immediate Dentures can:

- List provisionals placed now and the permanent dentures to be delivered in the future (often misunderstood by patients)
- Remind the patients that insurance usually covers one prosthesis or the other, but not both
- List the prices for Phase I – immediate temporary dentures, and Phase II – laboratory relines or new permanent dentures (eliminates financial controversies)

The form is titled "INITIAL ORAL EXAMINATION" and is divided into 10 numbered sections:

- Radiographs:** Includes checkboxes for X-ray, Panor, Imp, and Radiographs from another DSO.
- Oral Cancer Screen:** Includes checkboxes for Yes and No.
- Perio Assessment:** Includes checkboxes for Class (I, II, III, IV), Hygiene (Good, Fair, Poor), and various periodontal conditions like Periodontitis, Gingivitis, and Gravidity.
- Orthodontics:** Includes checkboxes for Overbite (> 50%), Overjet (> 3 mm), Crossbite, Class (I, II, III), and Anterior Crowding.
- Clinical Examination and Treatment Form:** Includes a checkbox for "Is this form completed?".
- Soft Tissue:** Includes checkboxes for Lip, Cheek, Tongue, Floor, and Palate, each with Yes, No, and Other options.
- Occlusion:** Includes checkboxes for Class (I, II, III) and Other.
- TMJ:** Includes checkboxes for All WHL, Headaches, Clicking, Grinding, Locking, Clicking, and Muscle Pain.
- Review Medical History:** Includes checkboxes for Review w/pt and Comments.
- Home Care:** Includes checkboxes for Plaque, Calculus, Stain, and Bleed.

Here is simple illustration of how a good chart can help. I see many cases each year where a patient transfers from dentist A to dentist B, often because of insurance charges. Dentist

Continued On Page 61

2005 VDA Elected Leadership Candidates

The 1996 Virginia Dental Association House of Delegates adopted Constitution and Bylaws changes stating that candidates for VDA elective offices have the opportunity to submit a statement and CV to be published in the April-May-June issue of the Virginia Dental Journal. Candidates for President-Elect can have a 500 word statement. All other candidates can have a 250 word statement. This will give the members of the Virginia Dental Association an opportunity to meet the candidates for elected offices.

Candidate For the Office Of President-Elect:

Ann C. Adams, D.D.S.



I have so many feelings as I write to ask you for support to allow me to serve you as your President Elect for the coming year. I also ask for support

to continue serving as Delegate to the American Dental Association for another three years.

I remember my feeling of excitement as a first year dental student. What was in store?

I remember one of my first dental society meetings at Neilsons Restaurant when Dr. Richard Wilson was president. I was different. I wasn't made to feel different. I remember when Dr. Charlie Cuttino called me to ask me to serve on the bylaws committee. I asked him, "What am I, your token female?"

I remember when there was never a line at the ladies room during CE courses. I remember making a suggestion about meals at the Richmond Dental Society Meeting and Dr. Tom Cooke told me I

could be in charge of hospitality. I said if he put me in charge, we would have cover dish dinners. Needless to say I never served on the hospitality committee. I remember going to schools during February, Children's Dental Health Month. I remember my first VDA Meeting in Norfolk as a delegate. How exciting it was to be a representative to help shape the future of Dentistry. I remember being at the forum with the ADA President when I tried to tell him that we should have a Committee on the New Dentist not a Committee for the Young Dentist. I could go on for hours but I will save you that.

Membership is one of the most important issues that we need to address. We need everyone's help. If we could have all dentists in the country become a part of our family of dentistry, we could speak with authority and everyone would listen. Can you imagine our legislators and insurance companies, if we could speak for 160,000 dentists? If we could accomplish this, we wouldn't have any more problems. We could be good advocates for our patients and our profession.

We also need to do everything in our power to keep our profession strong and effective for the people who follow us in the practice of dentistry. Mentoring and identifying leaders will secure our future. We need to remember that we are a profession and have responsibilities to our communities and the health of the commonwealth.

We need to train people in our profession to become experts in all areas that effect dentistry. No one person can know everything or has enough time to keep up with everything. If we had a team of people that could speak on different areas of interest to them, and the association, we could divide the jobs. Maybe this would encourage more individuals to step forward and lend their expertise to solve our problems.

I am sure we will face a lot of adversity in the coming years. Nothing seems to get easier. We will develop solutions for these problems as long as we maintain our strong family of dentistry, our mission, our vision, and our values.

Anne Carter Adams, B.A., M.S., D.D.S.
10124-Q W. Broad St.
Glen Allen, Virginia 23060
804-270-6808

Education: VCU School of Dentistry, D.D.S. 1980; VCU, M.S. Microbiology 1975; Radford College, B.A. 1967.

Honors: Nominee, VCU School of Dentistry's Alumni Star Award, 1995; International college of Dentists, 1994; Pierre Fauchard Academy, Chairman, 1992-1994; Pierre Fauchard Academy, 1990; Fellow, Virginia Dental Association, 1989; American College of Dentists, 1989; Omicron Kappa Upsilon, 1987.

Membership and Leadership: ADA: Member 1980-present; Delegate 2003-2006; Alternate Delegate 1996-2002; Chairman, Membership Reference Committee 1999; Council on Membership 1996-1999; Chairman, Council on Membership 1998; Advisory Committee, Allied Dental Personnel Study 1993-1995; Council on Dental Education 1993-1996. VDA: Member 1980-present; Board of Directors/ Executive Council 1999-present; Virginia Dental Foundation 1998; Dental Education and Continuing Education Committee 1992-1997; Planning Committee 1995-1997; Alternate Delegate 1996-1998; Public Information Committee 1985-1993; Stare Chairman, Children's Dental Health Month 1989-1992; Long Range Planning Committee 1987-1990; Auxiliary Education and Financial Aid Committee 1987-1990, Chair 1990-1992; Ad Hoc Committee on Auxiliary Education 1988-1992.

Richmond Dental Society: Delegate, Virginia Dental Association 1983-present; Nominating Committee 1993-1999, Chairman 1998; Long Range Planning Committee Chairman 1996-1998; Budget and Financial Committee 1991-1994; Continuing Education Committee 1991-1994; President 1992-1993; President Elect 1991-1992; Board of Directors 1987-1994; Laws Committee Chairman 1993; Treasurer 1989-1991; Dental Health, Public Information and Community Involvement Committee 1985-1991; Chairman, Children's Dental Health Month 1985-1987; Bylaws Committee 1983-1985.

**Candidate For The Office of Secretary/Treasurer:
Dr. Robert A. Levine, D.D.S.**



As a candidate for the Virginia Dental Association Secretary-Treasurer, I would consider it an honor and privilege to serve our society with you.

The VDA is in excellent condition.

Our volunteer members bring us depth, diversity and strong leadership abilities. We enjoy a wonderfully talented professional staff. We have goals and achievements that make us proud to be members, and we are financially sound. That is yesterday's news. We need to vigilantly maintain our momentum, and we must be prepared and flexible to address any issues, obstacles or opportunities that come our way.

My background has prepared me to serve as a financial officer. I can competently address the varied and complex issues that confront a volunteer nonprofit association. My work with the Virginia Dental Services Corporation gives you an idea of the commitment and enthusiasm I would bring to this elected position. Having served on my component's Budget & Audit Committee and participated at VDA budget planning sessions, I feel well prepared to tackle the matters involved. I thank you for your consideration and support.

Robert A. "Bob" Levine, D.D.S.
3918 Prosperity Avenue, Suite 203
Fairfax, Virginia 22031-3333
703-280-1300
levinera@verizon.net
Component VIII

Education: Tulane University 1972-1975. Medical College of Virginia/Virginia Commonwealth University School of Dentistry, DDS 1979. University of Connecticut School of Dental Medicine Family Dentistry Residency, Certificate 1981. VCU School of Business 1977-78. Memberships: ADA, VDA, NVDS, Academy of General Dentistry, Implant Society of Northern Virginia.

Honors: Fellow VDA, Fellow AGD,

Fellow American College of Dentist, Fellow International College of Dentists, Fellow Pierre Fauchard Academy, Presidents Award VDA, Appreciation Plaque Virginia Dental Services Corporation (for President), Recognition Plaque NVDS (for President), Recognition Plaque Alexandria Dental Society (for President), Appreciation Plaque NVDS (for CPR instructor), Appreciation Certificate NVDS (for Constitution & Bylaws Committee), Appreciation Certificate NVDS (for Insurance Committee), Appreciation Certificate NVDS (for Peer Review Committee), Certificate of Appreciation Northern Virginia Dental Clinic volunteer, Certificate of Appreciation Alexandria City Public Schools Employment Training Program, Recognition Certificate City of Alexandria (for Alexandria Public Health Advisory Commission).

Leadership and Professional Activities: Virginia Dental Services Corporation, President 2001-2004 (member 1997-present). VDA House of Delegates Fiscal Affairs Reference Committee, Chair 2002. NVDS, President 2000-2001. Alexandria Dental Society, President 1987-1988. Chair of the following in NVDS; Board of Directors 2001-2002, Constitution & Bylaws Committee 2001-2002, Executive Committee 2001-2002, Insurance Committee 1993-present, Strategic Planning Committee 2001-2002 and Peer Review Committee 1997-1998. VDA Insurance Committee 1993-1997 and VDA Annual Meeting Host 2003 & 2004. NVDS Budget & Audit Committee 1998-2001, NVDS CPR Instructor 1987-1994, NVDS Patient Relations Committee 1989-1993 and NVDS Science Fair Judge 2001 & 2002. VDA Delegate Annual Meeting (1990-present).

Community: Northern Virginia Dental Clinic 1994-present, VDA Mission of Mercy 2002 & 2004, Alexandria Hospital Christmas Day (non-medical Volunteer) 1984-present, Alexandria Public Health Commission 1983-1985. Agudas Achim Congregation Young Couples Club Chair 1988-1991, Men's Club High Holiday Volunteer 1988-present. Alexandria Employment Training Program 1994.

**Candidates For ADA Delegate:
4 Positions Available**

**Ann C. Adams, D.D.S.
Please See President-Elect Section
For Statement And CV.**



David Anderson, D.D.S.



The commitment that dentists have to their patients and their profession is nothing short of outstanding. I believe that it is the duty of every elected member of the VDA to carry that commitment and work ethic to the ADA.

My background and experiences have prepared me for this challenge and I pledge to you to place every effort to advance the practicing dentists goals.

We have facing us many challenges: Education, a mid level professional is proposed. Insurance, we need more competition [direct reimbursement] and less interference. Access, build on our tradition of MOM. Regulation, science has to be our guide.

I am honored to be considered as a candidate for ADA Delegate. I believe I have made contributions in the past and with that working knowledge I will work with you to achieve our goals. I ask for your support.

Education: A.B. Seton Hall University, D.D.S. MCV, Cert. Perio Fairleigh Dickinson University

Memberships: ADA, AAP.

Honors: American College of Dentists, International College of Dentists, Pierre Fauchard Academy

Leadership Activities: ADA: ADA Alternate Delegate, ADA Delegate, ADA Council on Communications [Chair 2003-2004], Member of Tomotrows

Dental Office Today Advisory Panel
VDA: VDA Past President
Component Society: NVDS Past President

Bruce R. DeGinder, D.D.S.



What an exciting time to be serving in organized dentistry. Both the Virginia Dental Association and the American Dental Association have been evolving to meet the needs and concerns of

our members. This evolution has created a great deal of enthusiasm amongst our membership and exciting opportunities are on the immediate horizon.

The future of our profession is often guided by the policies and programs of the American Dental Association. I have served on the Virginia delegation of the American Dental Association for five years. I feel I have a thorough understanding of our governance system and of the responsibilities a delegate must fulfill.

Serving as president of the Virginia Dental Association last year, I had the unique opportunity to travel to every component, and I have listened carefully to our membership's concerns. I ask for your support in electing me as an ADA Delegate where I will work to address these issues and concerns in a very proactive manner.

Dr. Bruce R. DeGinder, D.D.S.
240 McLaws Cir. Suite 153
Williamsburg, VA 23185
(757) 220-9492
Component 2

Education: University of Virginia, Echol Scholar – B.A. with Distinction, 1984; Medical College of Virginia School of Dentistry, D.D.S. – Magna Cum Laude, 1988.

Membership: ADA; VDA; Peninsula Dental Society; Academy of General Dentistry; Academy of Dentistry International; American College of Dentists; International College of Dentists; Virginia Academy of General Dentistry.

Honors: Academy of General Dentistry Distinguished Service Award; Fellow of the Virginia Dental Association; International Who's Who of Entrepreneurs; Fellow of the Academy of General Dentistry; Fellow of the American College of Dentists; ADA Golden Apple Award, New Dentist Leadership in Virginia; Fellow of the International College of Dentists; Who's Who of Dentistry; Pierre Fauchard Academy.

Leadership Activities: ADA and VDA: President of Virginia Dental Association; Vice President, Academy of General Dentistry; Chairman of the VDA Futures Task Force; VDA Vice Chairman of Executive Council; Annual Meeting Co-Chairman (1999-2000); ADA Local Arrangements Committee Washington, DC; Chairman of the ADA/VDA Membership Field Service Committee; ADA Alternate Delegate (1995-2002); Chairman of the VDA Membership Committee, Young Dentist Committee. **Component Society:** President (1994-95); President Elect (1993-1994); Secretary (1991-93); Chairman of the Planning Committee, Executive Secretary Search Committee, Young Dentist Committee, Membership Committee. **Other Dental Societies:** President, Vice President and Component Representative of the Virginia Academy of General Dentistry; Chairman of the Academy of General Dentistry Membership Council, Young Dentist Task Force, Legislative Committee; Region V AGD Treasurer and Parliamentarian; AGD Delegate & Alternate Delegate; AGD – Local Arrangement Committee; Part-time Faculty at MCV Dental School; Board of Trustees and Treasurer for MCV Alumni Association.

Community: Williamsburg Community Hospital Dental Staff; Colonial Capitol Kiwanis Community Service Committee Chairman; Volunteer Dentistry in Jamaica in coordination with MCV Dental School; VDA Mission of Mercy Projects & Donated Dental Services Programs.

M. Joan Gillespie, D.D.S., M.S.



As with the VDA House of Delegates, the ADA House of Delegates is and should be, the voice of dentistry. Practicing dentists are facing the patients, answering

their needs, projecting their dental futures and treating them with a professional and ethical mode of care.

Organized dentistry needs to be just that, whether it is being proactive in Alaska regarding access to care and tiered dentistry or reactive in California regarding licensure, we must be organized to maintain control over the protection of our patients and the future of our profession.

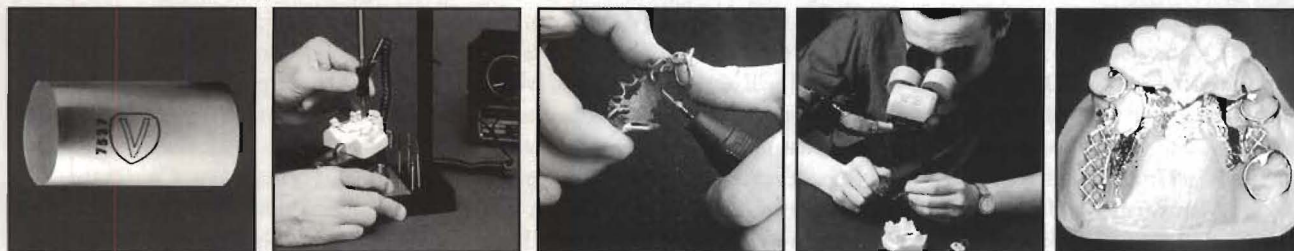
Serving on the ADA Delegation, as Virginia's chair is an honor that I appreciate and a responsibility that I take very seriously. I would hope that my diverse range of experience will continue to bring meaningful input into the varied issues that confront our members and our patients. Thank you for your consideration as I ask for your support to allow me to represent your interests as a Delegate to the ADA.

Education: Trinity College, A.B., 1964
Georgetown University Dental School, D.D.S., 1968, Georgetown University Graduate School, M.S., Periodontics, 1971

Membership: ADA, VDA, NVDS since 1972; American College of Dentists; American Association of Women Dentists; Fairfax County Dental Society; Alexandria Dental Society; American Association of Dental Examiners; Southern Regional Testing Agency; American Academy of Periodontology; Pierre Fauchard Academy; International College of Dentists.

Honors: ADA Commission on Dental Accreditation 2003-2007; ADA Council on Ethics By-Laws and Judicial Affairs, 1995-1998 Vice Chair, 1997; Chair, Virginia Delegation to American Dental

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Candidates For The Office of ADA Alternate Delegate: 5 Positions Available

Ronald J. Hunt, D.D.S.



The academic and practicing dental communities are closely intertwined and share common ideals, goals, and challenges. In Virginia, the VCU School of Dentistry and the Virginia Dental Association enjoy

a mutually beneficially relationship. As dean of the School of Dentistry and member of the VDA Board of Directors and Legislative Committee, I strive to strengthen even more the bond between these two great institutions. In addition to keeping the VDA leadership apprised of dental school activities, my role on the Board of Directors and Legislative Committee is to provide counsel in matters involving dental and dental hygiene education and research. As a past member of the ADA Commission on Dental Accreditation, I provide counsel on matters of accreditation. As a board-certified public health dentist, I provide counsel on issues involving public health dentistry and Medicaid. If reelected to serve another two-year term as an alternate delegate to the ADA House, I will continue to strive to provide fellow delegates informed counsel regarding dental education, accreditation, research, and public health issues to come before the House.

Name: Ronald H. Hunt
Address: VCU School of Dentistry, Box 980566
City and Zip: Richmond, 23298
Phone: (804) 828-9184
Component: 4

Education: University of Iowa, DDS and MS in Dental Public Health

Memberships: ADA, VDA (North Carolina and Iowa state associations previously), American Dental Education Association, American Association of Public Health Dentistry, International Association for Dental Research

Honors: Diplomate of the American Board of Dental Public Health; Omicron Kappa Upsilon Honorary Dental Society; Visiting Fellowship to University of Adelaide, **Australia**; Gies Fellowship to the American Association of Dental Schools; National Academy of Practice in Dentistry; American College of Dentists; International College of Dentists; and Pierre Fauchard Academy.

Leadership Activities: Dean of VCU School of Dentistry; VDA Board of Directors and Legislative Committee; Section President for International Association of Dental Research; Dental Public Health Consultant, Curriculum Consultant, Site Visit Chair, Outcomes Assessment Committee Chair, Vice-Chair, and Commissioner of the ADA Commission on Dental Accreditation; Delegate to the American Dental Education Association House of Delegates; Chair of the Board of Directors for the Virginia Statewide AHEC Program; Chair of VCU's Committee on Equity and Diversity; chair of numerous academic dentistry committees at three dental schools.

Dr. McKinley L. Price, D.D.S.



Our challenges continue in dentistry in which a cohesive political approach to solving them is required. It is within this arena that I have served the Virginia Dental Association. My sphere

of involvement includes appointments from the Governor to volunteering for the MOM project.

For over 20 years, I have served with honor at the state level of the VDA. I have served as treasurer, vice president and president of my local component, as well as a State Delegate. I have chaired the Auxiliary Education and Relations Committee and currently serve on the Board of Directors (formerly the Executive Council). I will continue to contribute to organized dentistry with partnership and relationship building.

I have been appointed to serve as Alternate

Delegate this year by our state President. I would like to build on this experience and continue to be a contributing member of our ADA Delegation.

McKinley L. Price, DDS
635 Pilot House Dr.
Newport News, VA 23606
757.873.2888
Component 2

Education: Hampton Institute (now Hampton University), 1971, B.A. Biology; Howard University Dental School, 1976, DDS; Provident Hospital (Baltimore), Certificate in General Anesthesia, 1977.

Memberships: Peninsula Dental Society; Virginia Dental Association; American Dental Association; National Dental Association; Old Dominion Dental Society; Norman Lassiter Dental Society; Academy of General Dentistry.

Honors: Fellow of Virginia Dental Association, 1995; Fellow of American College of Dentists, 1995; Fellow of International college of Dentists, 2001; Fellow of Pierre Fauchard Academy, 1996; National council of Community and Justice Humanitarian Award, 1996; Virginia Peninsula Chamber of Commerce Distinguished Citizen of the Year, 1996; Joint Resolution #685 of the Virginia General Assembly Commendation, 1997; City Council of Newport News Resolution of Appreciation, 1997 and 2002; Warwick Rotary Club Community Paul Harris Fellow Award, 1996; Daily Press Citizen of the year Finalist, 2000 and 2002.

Leadership Activities: ADA: Appointed as Alternate Delegate, 2004 by Virginia Dental Association president. VDA: Chaired State Committee – Auxiliary Education and Relations; Delegate 1988-1992, 1999-2001; Virginia Dental Association Board. Component Society: Served as Treasurer; Vice President; President (first Black to serve as President); Counselor; Component Board.

Community: Bank of Williamsburg Board of Directors; Riverside Health Systems Board of Directors; Co-Chair and Founding Member of People to People (a community group started to increase dialogue between a diverse population in the city); Board of Peninsula Alliance for Economic Development, 1998-2001; City Council of Newport News (appointed), 2004; Chesapeake Bay Bridge and Tunnel Commission, 1996-2001; Virginia State Board of National Council of Community

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Gary R. Arbuckle, DDS
Brandon S. Hollender

and Justice, 1998-2000; Newport News Education Foundation; School Board of Newport News – serving as chairman for two years, 1984-1992; Newport News NOW; Member of First Church of Newport News (Baptist).

J. Ted Sherwin, D.D.S.



I look forward to serving as an Alternate Delegate at the ADA Annual Meeting in Philadelphia this fall. I am seeking election for another term in order to build on this experience.

I believe this continuity, my enthusiasm for the future of dentistry, and my years of experience in the VDA, will continue to be a positive addition to the Delegation at the 2006 ADA Annual Meeting.

As Alternate Delegate at the ADA meeting in Orlando, I had the privilege to serve our District's Delegation as Reporting Chairman for the Observer Team on Budget and Finance. This was a terrific opportunity to work with other members of our District Delegation and learn about the ADA's budget process. I seek your support so that I can effectively represent and implement what I've learned in the 2006 delegation.

Education: Florida State University, Religion/Philosophy, BA; Medical College of Virginia, 1984, DDS.

Membership: SVDA, VDA, ADA, AGD. Honors: Fellow, International College of Dentist; Fellow, American College of Dentist; Fellow, Pierre Fauchard Academy; Fellow, Academy of General Dentistry, Who's Who in Dentistry; Appointed by Governor George Allen, Radiaton Advisory Board.

Leadership: ADA Alternate Delegate 2004, 2005; VDA Council on Finance, Chairman; VDA 2004 Local Arrangement Committee, Chairman; VDA Dental Practice Regulations, Chairman; VDA Futures Initiative, Visionary Leadership, Group Leader; VDA Reference Committee, Fiscal Affairs; VDA Budget and Financial Affairs Committee, Vice Chairman; VDA Legislative Committee, Subcommittee

on New Hygiene Schools, Chairman; VDA Hygiene Taskforce; VDA VAD-PAC member; VDA, Delegate, House of Delegates, since 1994; SVDA President; AGD Region V Regional Director, AGD national Leadership Conference, Chairman, VAGD President (AGD Constituent of the Year Award).

Community: Orange County School Board; Orange County Library Board, Chairman; MOM Project (Wise, 2001, 2002, 2003, 2004); Germanna Community College, Culpeper Advanced Technology Initiative; Orange Presbyterian Church: Elder, 12 years Sunday School Teacher; Orange Rotary Club: Fund Raising Czar, President, Paul Harris Fellow, Rotarian of the Year; Orange County Chapter, American Cancer Association.

Neil J. Small, D.D.S.

I have been active in organized Dentistry



all my professional career. Academically I have been a Clinical Assistant Professor in General Dentistry and Endodontics at the University of Buffalo and Georgetown

Dental, and have lectured for over 20 years. I have served in various capacities in the Northern Virginia Dental Society and Virginia Dental Association. My deepest interest has been the Peer Review and Patient Relations Committee. For over 12 years I have been a member, and chairman of both the local and state committees. I have served in several other committees and was President of the NVDS in 2002. I have watched the challenges Dentistry has faced for 25 years and have worked, actively to deal with the resolution of each issue. These varied experiences, make me eager and enthusiastic in representing our state at the national level. I hope to bring my past experience and mediation skills to the Delegate post. I hope you will elect me.

Education: Long Island University - B.S. Biology, Georgetown School of Dentistry- DDS, University of Buffalo Center for Endodontics-1978 Diplomate American, Board of Endodontics-1987,

Membership: American Dental Association, Virginia Dental Association, Northern Virginia Dental Society (Past President), American Association of Endodontics, Alpha Omega (Past President) **Honors:** Fellow American College of Dentistry, Fellow International College of Dentistry, Fellow Pierre Fauchard Academy, Fellow American Board of Endodontics, Fellow Virginia Dental Association, David Mast Memorial Award of Excellence in Continuing Education-District of Columbia Dental Society, Georgetown University Dental Alumni Board of Directors 1995-2000

Dr. Roger Wood, D.D.S.

It is with respect that I again ask for your support for Alternate Delegate. As a



teacher at MCV, as a mentor to dental students, and as an active practitioner, I have been privileged to be involved on many levels of dentistry. I feel a great responsibility and commitment and

enjoy the giving of time and energy to our profession. As Co-Chairman of the Richmond "Give Kids A Smile Day" (since inception), it is exciting to see the eagerness of the volunteers and their willingness to sacrifice their valuable time. I have been fortunate to work on many VDA committees and have especially enjoyed serving as Chairman of the Legislative and the Dental Practice Regulations Committees. I feel strongly about the issue of access to care. Therefore, it was a great privilege to be a member of the Mission of Mercy Task Force that initiated what has become so important to people in need and indeed to the volunteers themselves. I also became a member of a Wise County hospital staff so that I could return to treat children under general anesthesia. We can all make a difference. I was elected Chairman of the ADA council on Dental Education and Licensure for 2004 to 2005. In this capacity I work almost daily with issues that face us now and will be facing us in the future. It is extremely important that the ADA remain a strong voice for dentistry and meets the needs of our existing and future members.

Roger E. Wood, D.D.S.
11601 Robious Road
Midlothian, Virginia 23113
(804) 794-3498
Component 4

Education: Elon College, AB, Biology, 1967; Medical College of Virginia, D.D.S., 1975; Indiana University – Purdue University at Indianapolis School of Medicine and Hospitals, Residency in Pediatric Dentistry, 1975-1977; Associate Professor, MCV; Clinical Professor, MCV.

Memberships: ADA; VDA; RDS; American College of Dentists; American Association of Dental Examiners; American Dental Political Action Committee; Richmond Donated Dental Services Advisory Board; American Society of Dentistry for Children; American Academy of Pediatric Dentistry; American Board of Pediatric Dentistry; Southeastern Society of Pediatric Dentistry; VA Society of Pediatric Dentistry; MCV Alumni Association; Delta Sigma Delta; Richmond Dental Study Club; Johnston-Willis Hospital Staff; Chippenham Hospital Staff; St. Mary's Hospital Staff (Richmond, VA); St. Mary's Hospital Staff (Norton, VA.).

Honors: A.D. Williams Scholar, 1974; MCV Outstanding Senior Award, 1974; appointed by Governor to VA State Board of Dentistry, 1988; President, VA State Board of Dentistry, 1992; American Board of Pediatric Dentistry, 1988; Consultant, American Board of Pediatric Dentistry, 1991-1992; Fellow, VDA, 1992; Editorial

Board, VA Dental Journal, 1992-present; Life Member, American Board of Pediatric Dentistry; Fellow, Pierre Fauchard Academy, 1993; citizen of the Year Award, 1999, for Goldsboro, NC Flood Relief awarded by Omega Psi Phi Fraternity; Award of Appreciation from the City of Goldsboro, NC for flood relief, 2000; Congressional Award for Extraordinary Leadership and Compassion for service to the people of eastern NC during the devastation of the floods of 1999 from Congresswoman Eva M. Clayton; American College of Dentists, 2000; VDA "Hero" Award for flood relief activities, 2003; VDA Community Service Award, 2003; Unsung Hero Award by VA health Care Foundation for outstanding teamwork in obtaining extraordinary results for "Missions of Mercy" 2003; The Autism Society of Virginia's Medical Professional of the Year, 2003; VDA Executive Directors Award for Community Service, 2004.

Leadership Activities: ADA: Member of Council on Dental Education and Licensure 2001-2005, Chairman of Council on Dental Education and Licensure, 2004-2005; Dental Practice Parameters Committee: Committee on International Programs and Development; Subcommittee to address dental laboratory technology personnel recruitment and retention, 2002-present; Subcommittee on Quality Assessment and Improvement, 2002-present. VDA: Mission of Mercy Task Force; Mission of Mercy Committee; Mission of Mercy Volunteer-present: Chairman

Access to Care Task Force, 2002-present; Member of VDSC Board of Directors, 2001-present, Secretary/Treasurer 2004-present; Legislative Committee 1998-present, Chairman 1999-2001; Steering Committee, Virginians for Improving Access to Dental Care; Futures Task Force; Dental Practice Regulations Committee, Vice Chairman; Planning Committee; Reference committee. Component Society: Delegate to VDA; Alternate Delegate to VDA; Political Advisory Committee; Ad Hoc Advertising Committee, Chairman; Richmond Dental Society Board of Directors, Secretary 2003-2005; Long Range Planning Committee; United Way Campaign for Dentists; Corporate Sponsorship Committee, Chairman; Dental Health Month Chairman; Co-Chairman for Richmond "Give Kids A Smile Day"; MCV class leader for Clinical Simulation Campaign. VA Board of Dentistry: Legislative Committee, Chairman, 1990-1992; Secretary/Treasurer, 1990-1991; President, 1992.

Community: Advisory Board, Richmond Donated Dental Services, 1998-present; Organization for flood relief in Goldsboro, NC, 1999-2000; Prenatal Classes at Chippenham and Johnston-Willis Hospitals, monthly lectures on infant oral health care, 1998-present; Episcopal Church of the Redeemer, Vestry, Finance Chairman, Capital Campaign Chairman; CARITAS volunteer; Cross-Over Dental Clinic Volunteer; Youth Soccer Coach; Examined and treated 20 Russian or-

phaned preschoolers and arranged medical treatment for them while they visited the Richmond area, 1998; Health Volunteer Overseas, screened and treated athletes in the International Special Olympics, Ireland, 2003; Co-Chairman and donator of dental services for Richmond "Give Kids A Smile Day"; Perform volunteer dental services for "Missions of Mercy."

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Board of Directors Actions in Brief and ADA Annual Meeting Delegation Report

The following items are required to be published in the Journal per the Constitution and Bylaws of the VDA

Virginia Dental Association
Board of Directors
Actions in Brief
January 20 – 22, 2005

I. Actions of the Board of Directors
A. The following items were considered:

1. Background: The Loudoun County Volunteer Adult Dental Clinic is threatened with closure because a modest 6-10,000 dollar annual operating budget may be cut. In Virginia many counties and other local jurisdictions have volunteer programs where private practice physicians and dentists can volunteer their services. Doctors use such facilities to provide pro bono clinical care to patients who face obstacles receiving regular health care. Volunteer facilities like the one in Loudoun receive operating funding from various sources, including grants and local county governments. The Loudoun County Board of Supervisors is currently reviewing a 2006 budget which may not approve the modest \$6-10,000 funding needed.

Resolution 1: The VDA supports local, regional and state efforts to support volunteer pro bono clinical opportunities for dentistry. The VDA especially appeals to Virginia's County and Regional governments to continue financial support to already established, on-going programs and facilities which allow volunteer dentists to offer much needed dental care to patients who face financial and other obstacles and are unable to otherwise receive treatment. The Board of Directors approved Resolution 1 with a recommendation the House of Delegates vote yes.

Resolution 2 Background: There is a significant shortage of dental hygienists in some areas of the state. This limits the availability of preventive dental services to Virginians. The Dental Practice Regulations Committee is in favor of making supragingival scaling a delegatable duty to dental assistants with Board of Dentistry approved education and training. Budgetary Impact: No anticipated budget impact on the VDA.

The Board of Directors approved Resolution 2 with a recommendation the House of Delegates vote yes.

B. The following items were approved by the Board of Directors and are reported as information only:

1. The Virginia Meeting will be held in Norfolk 2007, Williamsburg 2008, Norfolk in 2009 and Williamsburg in 2010.

2. Background: On advice of counsel SB1127 (Licensure by Credentials) section 54.1-2709.5 Item B, is unconstitutional.

Item B States: A license granted pursuant to this section shall be automatically revoked if the licensee does not practice dentistry solely within the boundaries of the Commonwealth within two years of the granting of such license or if, having held the license for two years, the licensee ceases to actively practice dentistry solely within the boundaries of the Commonwealth. Resolution two was approved to absolve this problem.

Resolution: Recommend to Board of Directors that section 54.1-2709.5 Item B of SB1127 be removed.

Background: To insure that the VDA's concerns regarding licensure by credentials are addressed by HB2368.

Resolution: Recommend to Board of Directors that we ask to have provisions 1-8 in SB1127 section 54.1-2709.5 Item B be inserted into SB2368.

3. Background: The Infection Control and Environmental Safety Committee has been working on a Best Management Practices manual and is very close to being able to publish it. The ADA Scientific Affairs division and legal counsel for ADA have amended the BMP but suggest the VDA's legal counsel also do the same prior to publishing.

Resolution: The Infection Control & Environmental Safety Committee requests VDA legal counsel review the BMP prior to publishing and request authorization to do so. Budgetary Impact: Unsure of legal costs at this time.

C. The following item was referred:
1. To the Dental Practice Regulation Committee to study the proper function, duty, training and responsibility of a "scaling technician" position in removing supragingival calculus and stain from a non-periodontally involved patient.

2. To the Legislative Committee: The Institutional Affairs Committee asks that the VDA monitor the Department of Corrections' bill asking for changes in the Code to allow them to get temporary

licenses for new dentists coming to work for the Department. This would be a help in new dentist recruitment. § 54.1-2715. Temporary permits for certain clinicians.

A. The Board may issue a temporary permit to a graduate of a dental school or college or the dental department of a college or university, who (i) has a D.D.S. or D.M.D. degree and is otherwise qualified, (ii) is not licensed to practice dentistry in Virginia, and (iii) has not failed an examination for a license to practice dentistry in this Commonwealth. Such temporary permits may be issued only to those eligible graduates who serve as clinicians in dental clinics operated by (a) the Virginia Department of Health, (b) the Virginia Department of Mental Health, Mental Retardation and Substance Abuse Services, or (c) the Virginia Department of Corrections, or (d) a Virginia charitable corporation granted tax-exempt status under § 501 (c)(3) of the Internal Revenue Code and operating as a clinic for the indigent and uninsured that is organized for the delivery of primary health care services: (i) as a federal qualified health center designated by the Centers for Medicare and Medicaid Services or (ii) at a reduced or sliding fee scale or without charge.

B. Applicants for temporary permits shall be certified to the secretary of the Board by the Commissioner of Health, the Commissioner of Mental Health, Mental Retardation and Substance Abuse Services, the Director of the Department of Corrections, or the chief executive officer of a Virginia charitable corporation identified in subsection A. The holder of such a temporary permit shall not be entitled to receive any fee or other compensation other than salary. Such permits shall be valid for no more than two years and shall expire on the second June 30 after their issuance, or shall terminate when the holder ceases to serve as a clinician with the certifying agency or charitable corporation. Such permits may be reissued after their expiration or may be revoked at any time for cause in the discretion of the Board.

C. Dentists licensed pursuant to this chapter may practice as employees of the dental clinics operated as specified in subsection A.

Making Contact - Serving The Community Through The Donated Dental Program

By: Dr. Kenneth Stoner, D.D.S.

Brunlinda came in with an assisted living helper, since making decisions was a challenge for her. She was in a lot of pain and desperately needed to have all her teeth removed and



a set of full dentures made. Charlie Cuttino lent us his surgical expertise and Great Impressions Laboratory donated their services. After a few months she was finished with the

first smile she had had in many years. She was one of the forgotten ones that had slipped through the cracks of our social system. Not an important person to most, but the best patient we had all year! It started off with me thinking I was going to help someone in Richmond by fixing their teeth. It ended up with her fixing my heart with her crooked little smile and her grateful thanks.

I think, as I'm sure each of you do, that we have a wonderful profession. I wanted to give something back to the community and Donated Dental Services (DDS) program seemed a great way to do it. Almost every

week, we get a request to donate dental services. Deciding who really needed it, and how much to do, was always a battle between the business side and the professional side of my practice. Since joining the DDS group it is not nearly as much of a wrestle with my conscience. When we get requests, we explain that we participate in this wonderful program and refer them to DDS.

Personally, I try to treat several patients a year depending on the size of the case.

I and my whole staff look forward to each visit from a DDS patient and I encourage each of you to consider joining this worthwhile program.

A Special Thank You To All Of Our DDS Volunteers and Labs

Dr. Jeryl Abbott
 Dr. Anne Adams
 Dr. Tony Agapis
 Dr. Lori Alperin
 Dr. Bradley R. Anderson
 Dr. Joseph Arzadon
 Dr. James Baker
 Dr. John Bass
 Dr. David Bertman
 Dr. Hood Biggers
 Dr. Eliot Bird
 Dr. Henry Boruck
 Dr. David Buckis
 Dr. James Burden
 Dr. Claude Camden, Jr.
 Dr. David Cantor
 Dr. Jonathon Carlton
 Dr. Norman Coleman
 Dr. Harry Conn
 Dr. Thomas Cooke
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 Dr. Kenneth Copeland, Jr.
 Dr. Mark Crabtree
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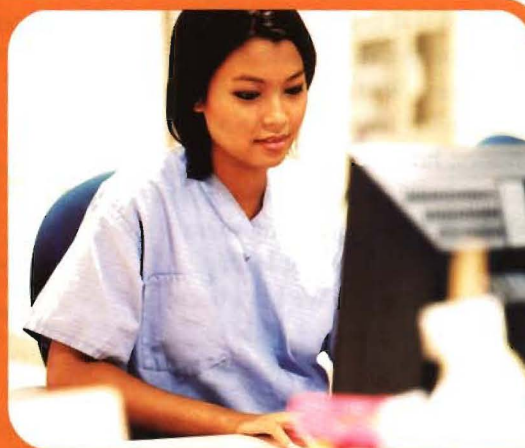
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Dr. Melanie Hartman
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 Dr. Ralph Howell, Jr.
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 Dr. L. Thornton Jert
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The Benefits of VADPAC

Submitted By: **Dr. Gus C. Vlahos, D.D.S.**
Chairman, VADPAC



I am sitting here writing this article for the journal just as we have completed another Legislative session. Last year we had 1295 VDA

members contribute to VADPAC. In the journal you will find the names of the dentist who are contributing members to VADPAC. I would like to thank these members for their contributions to VADPAC. With their help the VDA was able to be successful with its legislative agenda in this legislative session.

The VDA's successes this year included licensure by credential, but the big issue we faced was getting more money in the state budget to increase Dental Medicaid rates. We fought a uphill battle with many issues competing for more money, however we were able to get the Medicaid rates increased by around 20% which is a start of getting them up to where Dentists are not losing money to do the work. We have been very successful the last few years in the state legislature and this correlates with our ability to raise more money for VADPAC.

This is an election year in Virginia so we must work very hard to continue to raise the money we have raised for VADPAC, but we must work hard to increase the amount of money we raise. This year the VDA and VADPAC is working with ADA's Partnership For Growth to help VADPAC get to a higher level of VADPAC contributions. We all benefit from the VDA's successes but the successes would be greater if we could get more member

to contribute to VADPAC. It is not too late to contribute to VADPAC for this year as Emily Ward at the VDA office can take your contribution. More members need to help for our successes to continue in the legislative area.

Gus C Vlahos DDS
Chairman VADPAC

Be part of a winning team

VADPAC/ADPAC

Advocating For Healthcare That Works

Please Take A Moment To Recognize Those Members Who Help

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David Mueller
Dr. Tracy Oliver
Dr. Harvey Shiflet
Dr. Edward Weisburg

Component 2

Dr. William J Bennett

Component 4

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Dr. Michael Miller
Dr. James Nelson
Dr. James Schroeder Dr.
Alfred Stenger
Dr. Kimberly S Swanson Dr.
Lselie S Webb, Jr. Dr.
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Dr. Mark Crabtree
Dr. Edward Snyder

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Dr. Jack D Cole
Dr. Dana Chamberlain Dr.
Ronald Jessup
Dr. Gus Vlahos

Component 7

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Ted Sherwin Dr.
William Viglione

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Dr. Ronald Hunt
Dr. Michael Miller
Dr. James Schroeder
Dr. Alfred Stenger

Component 5

Dr. Edward Snyder

Component 6

Dr. Gus Vlahos

Component 7

Dr. C M Garrison
Dr. J Ted Sherwin
Dr. William Viglione

Component 8

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Dr. Scott Berman
Dr. M. Joan Gillespie
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Dr. Harvey H Shiflet
Dr. Edward Weisberg

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Dr. Ron Tankersley

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Dr. Thomas S Cooke, III
Dr. Charles L Cuttrino
Dr. Ronald Hunt
Dr. James R Lance
Dr. Michael Miller
Dr. James F Nelson
Dr. James R Schroeder
Dr. Alfred J Stenger
Dr. Kimberly S Swanson
Dr. Leslie S. Webb, Jr.
Dr. Roger E Wood

Component 5

Dr. David E Black
Dr. Mark A Crabtree
Dr. Edward P Snyder

Component 6

Dr. Bobby L Brown
Dr. Dana H Chamberlain
Dr. Jack D Cole
Dr. Roanald D Jessup
Dr. Gus C Vlahos

Component 7

Dr. C M Garrison
Dr. J Ted Sherwin
Dr. William J Viglione

Component 8

Dr. H J Barrett
Dr. Scott Berman
Dr. David M Deviese
Dr. William Dougherty
Dr. M Joan Gillespie
Dr. Bruce R Hutchison
Dr. Rodney J Klima
Dr. Melanie R Love
Dr. David A Whiston

VADPAC Commonwealth Club 2004

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Archer, Richard D
Baker, J Patrick
Brown, Townsend Jr
Bussey, William F Jr
Cahoon, Roger H
Caravas, Jerry G Jr
Caravas, Jerry G.
Casingal, Pedro
Cavallari, Kenneth J
Clayton, C G
Cleckner, Dennis E
Cooper, Kevin C
Cox, Thomas L.
Cox, William R Jr
Cranham, John C
Cruser, Melvin E III
Dodson, William S
Dodson, William S Jr
Dolenuck, Richard P
Drescher, Charles A
Drescher, Charles L.
Dunham, Thomas P
Edmonds, Robert M
Einhorn, Bernard I
Etheridge, Daniel M
Foster, David K
Foster, Richard D
Fulton, Catherine O
Furman, Randall I.
Glass, David A
Goldstein, Stephen M
Gowda, Shantala
Graham, David B
Guthrie, Alfred R Jr
Hamlin, Daura C
Hearne, Stephen P.
Hearne, Steve P
Hechtkopf, Michael J
Hendricks, Clay
Heriford, Susan E
Heriford, William D
Hermelin, Mark
Higinbotham, William H Jr
Hooper, Christopher A
Hopkins, Thomas U

Continued On Page 49

Many members of the Virginia Dental Association met with legislators prior to the 2005 Session of the General Assembly to underscore patient and professional needs. Those results produced positive actions.

On Sunday, February 27th, the Virginia General Assembly adopted a Budget Conference Report and headed out of town.

The 47-day session (one day longer than scheduled) saw the introduction of some 2,938 pieces of legislation. Out of that number, some 1,610 passed both houses of the General Assembly.

Bills that have passed both houses will be enrolled and sent to the Governor. The Governor has until March 29th to either amend or veto them. The General Assembly will return to town on Wednesday, April 6th for a Veto Session to consider the Governor's recommendations.

With the Republican House of Delegates standing for election in November, many of the measures approved by the House dealt with social issues. The majority of these measures, once they reached the Senate, were either dramatically amended or defeated.

On the Budget side, the principal issue of discussion was transportation. \$850 million was committed to transportation projects. Most of them were one-time projects. It is anticipated that in 2006, the legislature will need to take a thorough review of transportation needs across the Commonwealth.

The VDA this year had three specific pro-active issues on which they asked legislators to respond. These issues were:

- Establish stringent criteria for licensure by credentials.
- Expand the practice opportunities for volunteer dentists.

Dentists Working With Legislators Produce Positive Results

Submitted By: **Chuck Duvall, VDA Lobbyist**

- Increase Medicaid dental reimbursement rates so that more under-privileged children would have access to dental care.

The VDA also had on its 2005 agenda the protection of Assignment of Benefits legislation, which the association

tor Edd Houck at the request of the VDA, originally was a measure that would have allowed for licensure by credentials and established a restricted volunteer license to allow retired Virginia dentists to practice in public health settings.

HB 2368, patroned by Delegate Preston Bryant, was introduced at the request of the Board of Dentistry. This measure accomplished the objectives of the VDA bill and also cleaned up other portions of the Dental Act.

After deliberations with the Administration and representatives of the Board of Dentistry, these two measures were conformed; and both of them have been approved by the legislature. It

is important to remember that certain stringent criteria for licensure by credentials requested by the VDA are included in the final bills that have been passed.

The Budget:

The VDA has worked actively over the last several years with key members of the Virginia General Assembly and the Department of Medical Assistance Services to provide additional funding to increase Medicaid dental reimbursement rates.

By any objective criteria, Virginia's current Medicaid dental reimbursement rates needed to be increased. Considerably less than 1% of the Medicaid budget goes to dental services. Only about 20% of eligible children are receiving services and the number of dentists taking Medicaid patients continues to decrease.



worked very hard to pass in 1999. The Medical Society of Virginia introduced legislation during this session to secure Assignment of Benefits legislation for physicians. The VDA wanted to make sure that in that legislative tug-of-war Assignment of Benefits relative to dentists was not adversely impacted. More on this later.

Licensure by Credentials/Volunteer License:

The VDA gave long and serious thought to recommending a bill to authorize licensure by credentials for dentists in the Commonwealth of Virginia. Not only did the VDA spend considerable time reviewing this option but also the Joint Commission on Health Care, the Virginia Health Care Foundation, and Virginians for Approved Access to Dental Care Coalition also were reviewing this change to the Virginia Statute.

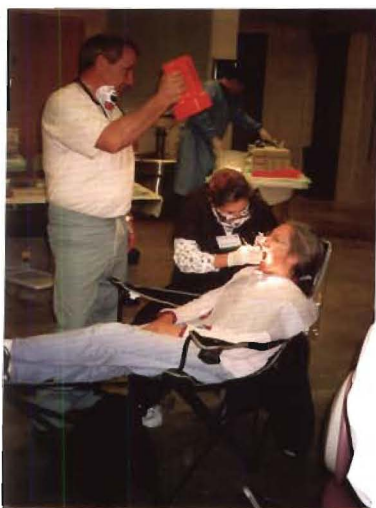
Senate Bill 1127, introduced by Sena-

Continued On Page 44

The Gift Of Giving - Reflections From The M.O.M. Project

By: Dr. Thomas S. Cooke, III

As I sit here contemplating what to write for this article, I am struck by the fact that with the MOM projects planned for this year we will approach 6 million dollars in treatment for the 15 thousand patients treated. I'm certain that back in July of 2000, when we initiated our first project, we had no inkling that MOM would be such a resounding success. Along with the awards and the recognition the program has received, we have also been able assist in the start-up of similar projects in Texas and Kansas. We have



developed great, positive relationships with the Secretary of Health Jane Woods (our own MOM Energizer Bunny), legislators from around the state, the Director of DMAS and Governor Warner.

On our first trip to Wise, Jill and I drove with Chuck Duvall. On our way, we all wondered what we would encounter and if we would have any patients since the event was to take place in an airport hangar and advertised only by flyer and word of mouth. Friday morning at 6 AM, we made the turn onto the road to Lonesome Pine Airport and were stopped in our tracks by cars backed up for miles-yes,

we definitely had patients! The line had started forming at 2 am. Working conditions were primitive to say the least—one 2- chair trailer, 4 working portable units, webbed lounge chairs for hygiene, some old dental chairs (no electricity) and the MCV van for surgery. We had handheld flashlights and no suction for hygiene and surgery. The demand was so great that we had to close the gates at 8 am. We treated patients on that first day until after 6pm. It was the same story on Saturday. The RAM organizers, who had done dental projects in other states and countries estimated, based on past experience, that we would be able to treat about 300 patients. By noon Sunday, we treated 739 patients doing \$190,000 in treatment. We attribute this to the large number of volunteers we mustered, the development of a better system of diagnosis/treatment and generally busting our butts!

We learned much from that first MOM project. We now have 15 portable units of our own, a compressor, panorex, suction for all surgical and hygiene chairs, cavitrons, and an impressive array of other equipment and supplies. We now operate with the efficiency of a well-oiled machine fueled by ingenuity and resourceful-



ness. The number of patients we treat in a weekend has nearly doubled since our first project.



I enjoyed that first experience so much that I have participated in 11 MOMs held in Virginia and went to Kansas to help them start up their first project. Witnessing firsthand the tremendous need that exists in our own state for dental services and more importantly, putting faces and stories to that need has had quite an effect on me. It has been one of my most rewarding experiences to participate in these projects, and I look forward to every MOM weekend for the fun and camaraderie of working with fellow dentists, dental students, hygienists, assistants and volunteers. I have seen how, with many hands, we make a tremendous difference. Please join us for a project and reap the tremendous reward of giving.

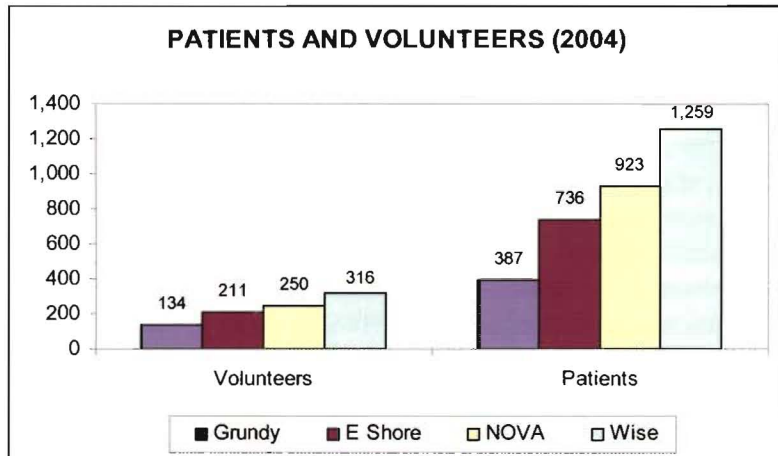
How Is The M.O.M. Project Doing?

Virginians receive \$1.4 million worth of free dental care

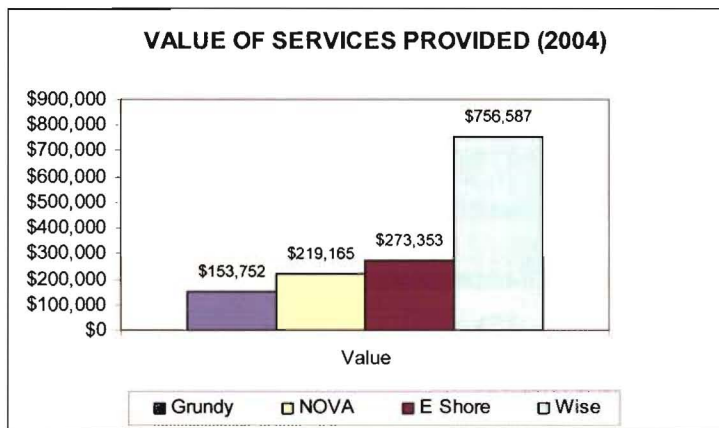
Caring, compassion, and the desire to “make a difference” have become trademarks of the Mission of Mercy. Hundreds of volunteers (coming from as far away as Texas and New York), dentists, hygienists, dental assistants, dental and dental hygiene students, friends and family, continue to donate their time, talents, and long weekends to help those in need. They report for duty at sunrise to make-shift dental clinics, ready to see the first patient. At the end of a long, 10 hour day they leave tired but eager to return the next morning and start all over again. Beginning in March, MOM returned to Nandua High School on the Eastern Shore for the 4th mission, Northern Virginia Community College in Springfield for their 2nd project, and Wise County Fairgrounds for their 5th event. The most recent project was hosted in October at the Riverview Elementary/Middle School in Grundy, the newest location for MOM. Over \$1.4 million of free dental care was donated to 3,305 uninsured and underinsured Virginians in 2004 who could not afford to pay for these services. Patients received 3,305 exams, 929 cleanings, 5,766 extractions, 2,206 fillings, 26 dentures, 3 partial dentures, 36 denture repairs, adjustments, and relines, 101 root canals/pulpotomies, 381 panorex x-rays, 164 sealants, and 251 fluoride treatments (a remarkable accomplishment)! A special thanks to all who made it possible.

4 Mom Projects = 80 Clinic Hours
(2004) 11,000+ Volunteer Hours

3,305 Patients Treated
\$1.4 Million In Donated Services

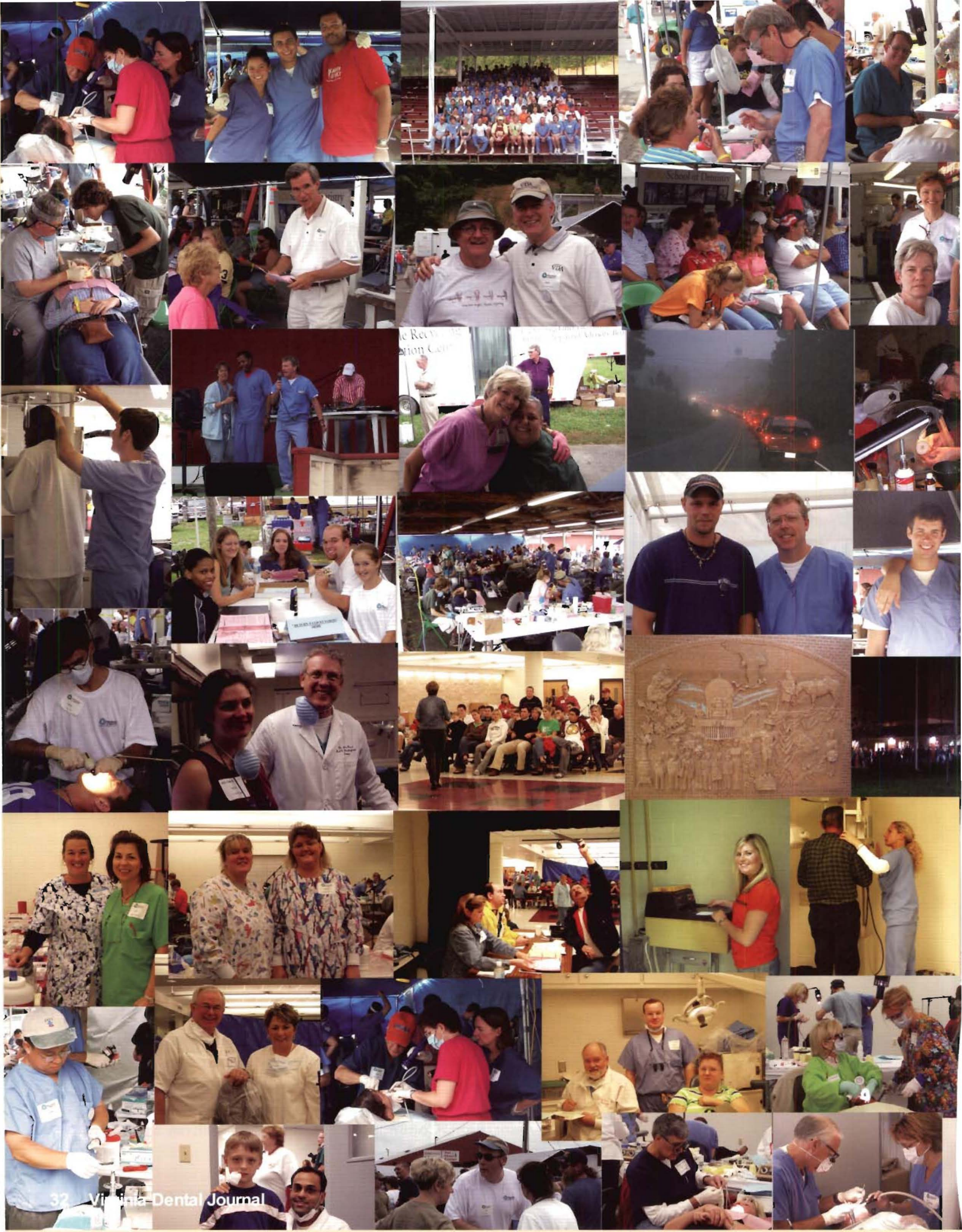


**15 Mission of Mercy Projects =
\$4.2 Million in Donated Dental
Care to 11,349 Patients**



Partnerships were formed with Remote Area Medical, St. Mary's Health Wagon, Eastern Shore Rural Health, Buchanan County Board of Supervisors, VCU School of Dentistry, Navy Dental Center, Tidewater Dental Society, Old Dominion University School of Dental Hygiene, Virginia Dental Hygiene Association, Commonwealth Hygienist Society, Virginia

Dental Assistants Association, UVA Medical Center, Southwest Virginia Dental Society, March of Dimes, Delta Dental Plan of Virginia, Virginia Healthcare Foundation, ARCHS, Alliance to the VDA, Virginia Department of Health, Campbell/Hoffman Foundation, Northern Virginia Dental Society, Lions Club, Sullivan Schein and Shur-Gard.





Our Sincere Gratitude To The Many Volunteers To The Mission of Mercy Projects in 2004!

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Dr. Anna Abel	Kendra Brown	Dr. Frank D'Aquila	Dr. John Friedman	Vicky Indri
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Jennifer Adkins	Valerie Byrnside	Dr. Bruce DeGinder	Dana Giles	Jay James
Jennifer Afzall	Tammy Cahoon	Dr. Jayne Delaney	Mary Bech Gill	Robin Jennings
Gaurav Agarwal	Laura Callas	Diana Delcher	Stephen Gill	Kim Johns
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Kelly Alcmaychu	Robin Caplan	Dr. John Deschamp	Heather Gleason	Dr. Herschel Jones
Francisca Alfaro	Theresa Caraway	Betsy Di Silvio	Dr. Steven Glessner	Julie Jones
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Jackie Aloezos	Dr. Steven Carroll	Tammy Dickens	Bebe Gonzalez	Matthew Joesse
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Tyson Anderson	Wesley Carroll	Cheryll Dickinson	Tammy Goswick	Dr. Neda Kalantar
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Michele Boaz	Vanessa Cooper	Dr. Gloria Fernandez	Scott Henson	Vickie Lazear
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Stephen Booth	Cherlyn Crawford	Rachel Finch	Gene Hilton	Dr. Benjamin Lee
Danea Boquer	Carrington Crawford	Rhonda Finchum	Adra Hinchman	Dr. David Leekoff
Dr. Henry Boruck	Joe Cress	Par Finnerty	Greg Hohl	Dr. Martin Less
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Marcia Boyd	Dr. Liz Cristofano	Harrison Fischer	Dr. Scheilandice Holmes	Dr. Jeff Levin
Kristen Brafford	Dr. Paige Crowder	Craig Flaherty	Jean Hong	Dr. Paul Levine
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Dr. Bryan Brassington	Scott Culpepper	John Flores	Dr. Ralph Howell	David Lewis
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Tina Brinley	Dr. Charles Cuttino	Christina Fought	Patti Hubbard	Justin Loftin
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			Ruth Hughes	Dr. Melanie Love
			Remedios Hughes	Eric Lovell
			Dr. David Hughes	Mary Jo Lynskey
			Claire Humes	Dr. Andy Ma
			Geroge Hunnicutt	Bernadette Mabanglo
			Julie Hunter	Sheree Madison
				Laura Mallinak

Continued On Page 42



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The logo for Give Kids a Smile. It features two stylized children's faces, one with pigtails and one with a wide smile, set against a background of a red and blue square. The text "Give Kids a Smile!" is written in a light blue, rounded font across the bottom of the logo.

**The Virginia Dental Association
would like to recognize and thank the
national sponsors of
Give Kids a Smile!**

**National Children's
Dental Access Day**

**Please demonstrate your support for these
companies and their efforts to promote
oral healthcare in our nation's children by
patronizing them whenever possible.**

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Virginia Dental Association

Statewide Give Kids a Smile! Results

Thank you to all of the volunteers, staff members, dentists, hygienists and suppliers who made this year's "Give Kids a Smile!" Access to Dental Care Day a huge success. Each of you gave unselfishly of your time and talent, and by each of us doing our individual parts, we made a huge impact.— Drs. Galstan and Ward, GKAS! State Leaders

Virginia Totals

Children: 8,551

Volunteers: 670

Value of Services: \$266,218



give kids a smile!SM

National Children's Dental Access Day



Virginia GKAS! State leaders Drs. C. Sharone Ward and Sam Galstan accept a Proclamation by the Commonwealth of Virginia recognizing Children's Dental Health Month and Give Kids a Smile Day! Governor Warner signed the Proclamation that was presented on February 9, 2005.

2005 Give Kids a Smile Volunteers

Thank you to all who participated in GKAS. Please note, those listed are names reported into the VDA by the press deadline for the Journal.

Dr. Mike Abbott	Dr. Roy Carter	Dr. Joe Greene	Dr. Guy Levy	Ms. Cathy Poythress
Ms. Carol Abbott	Ms. Linda Carter	Dr. Barry Griffin	Ms. Robin Levy	Dr. Carole Pratt
Dr. Anna Abel	Ms. Dorothy Carter	Ms. Melissa Griffith	Ms. Paige Lewis	Ms. Anitra Pregiato
Mr. Marcus Acham	Ms. Kristi Casper	Dr. Edward Griggs	Dr. Jeremy Lindgren	Dr. Norm Prillaman
Ms. Aisha Acham	Dr. Steven Castro	Ms. Donna Grober	Mr. James Little	Ms. Pam Pruitt
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Dr. Randy Adams	Ms. Marcie Chittum	Ms. Allison Guinn	Dr. James F. Londrey	Mr. Tom Prunier
Ms. Deborah Adams	Ms. Daura Clements	Mr. Paul Guion	Ms. Mary Lontchar	Dr. Rick Quigg
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Dr. Steve Alvis	Ms. Angela Cole	Mr. Dave Hall	Dr. Melanie Love	Dr. Kenneth Rassmussen
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Ms. Elizabeth Alvis	Ms. Nan Cook	Ms. Carol Hancock	Ms. Sonja Macklin	Dr. Elizabeth Reynolds
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Mr. Jeff Blair	Mr. Logan Driscoll	Dr. Wally Huff	Ms. Tanya Mitchell	Dr. Earl Shufford
Ms. SuAnn Blair	Ms. Christy Driscoll	Ms. Maureen Hunt	Dr. Sujit Mohanty	Ms. Deanne Shuman
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Dr. Jay Boyle	Dr. Frank Farrington	Ms. Charon Johnson	Dr. Fred Murray	Ms. Robin Small
Ms. Tamra Branwell	Dr. Gisela Fashing	Ms. Stephanie Jones	Ms. Mattie Murray	Dr. Marci Smith
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Dr. Juan Carrillo	Ms. Tammy Goswick	Ms. Sandy Lehman	Ms. Kathy Poteat	
Dr. Sobia Carter	Ms. Amy Graham	Dr. Brent Lenz		

Continued On Page 41

Component 1

On Saturday, February 5, 2005, from 9:30am – 1:30pm, the Boys and Girls Club of Southeast Virginia transported 91 patients from various facilities to the ODU hygiene clinic. Three groups of patients arrived throughout the morning



providing a steady flow of patients for volunteers from the TDA, ODU and the community. The junior and senior dental hygiene students examined each patient, took x-rays, and applied dental sealants when indicated. In all, 91 children were seen, 180 bite-wing x-rays were taken and 233 seal-

ants were placed. This was Tidewaters largest event thus far! Each patient received an oral hygiene supply bag prior to leaving the clinic.



2005 GKAS Totals:
91 Children, 62 Volunteers, \$25,638 in Donated Services

Component 2

Peninsula Dental Society GKAS volunteers came together during the month of February and visited 5 local elementary schools. In total, they saw 239 children



for oral screenings and oral hygiene instructions; each child received a goodie bag with a toothbrush, toothpaste, coloring sheets, stickers, and information.



2005 GKAS Totals:
239 Children, 27 Volunteers, \$ 11,950 in Donated Services

Component 3

February 4, 2005 was Southside Dental Society's Give Kids a Smile Day event. It provided the opportunity for Chesterfield County Schools, Southside Dental Society and Alliance, VCU School of Dentistry, Chesterfield County Health Department and the Division of Dental Health to work together to provide dental care. More than 260 students were screened for dental disease, and appointments were made in Drs. Castro, Galstan & Ward, Terry and Keeton's dental offices in Chesterfield County. Over 100 children received appointments, 88 children kept their appointments and received services including exams, x-rays, cleanings, fluoride treatments, sealants, composite fillings and extractions. Volunteers also went into several area schools and provided education and goody bags to 232 children.



Volunteers also went into several area schools and provided education and goody bags to 232 children.



2005 GKAS Totals:
492 Children, 57 Volunteers, \$ 34,277 in Donated Services

Component 4

Component IV had an extremely successful Give Kids a Smile Day on February 4, 2005. For the second year, GKAS Day was held at the Boys and Girls Club of Metro Richmond. This year 753 children were seen, with many getting to meet First Lady Lisa Collis while she read to them about dental health care during her visit. The RDS Alliance partnered with the RDS and the Boys and Girls Club on Saturday, February 5, 2005, and saw approximately 85 children at Eternity Church. All children were provided dental examinations, dental prophylaxes, and topical fluoride treatments. Thanks to the many VCU Dental and Hygiene students who made these two days so successful. Volunteer dentist have agreed to treat the 98 children who were deemed to need urgent care.



The office of Boyle Dentistry treated six children this year when the office was opened to those in need. More patients were anticipated, however, the families that participated were very appreciative; each child received an exam, prophylaxis, fluoride, dental supplies, 12 sealants were placed and 4 composites.



2005 GKAS Totals:
844 Children, 279 Volunteers, \$106,702 in Donated Services

Component 5

The Lynchburg Clinic opened its doors on February 4th to treat area children in need. 17 youngsters were provided with exams, cleanings and even x-rays valued at over \$1500. In Danville, the office of Dr. Helton welcomed kindergartners from a nearby school to receive free treatment on Friday, February 18th. Nine children were seen by members of Dr. Helton's dental team to receive exams, prophys, fluoride, sealants and x-rays.



Also in the Piedmont Dental Society, nearly 1400 children in the Martinsville and Danville area received education about proper oral care. Some were assisted by "Jack's Plaque Attack" a book written to help children



with understanding good dental care; while others performed experiments about sealants and the effects that plaque can have on your teeth.

2005 GKAS Totals:
1411 Children, 21 Volunteers, \$3,543 in Donated Services

Component 6

2,044 children in Washington and Pulaski Counties were given oral healthcare instructions and dental supplies through the coordinated efforts of local schools and area dentists for Give Kids a Smile! Additionally, the students with the greatest dental needs were identified and matched with a Southwest Virginia dentist to receive comprehensive oral care over the coming months at no charge.



In Dr. Huff's office, 42 children were seen as part of GKAS Day. All children received exams, cleanings and fluoride treatment while x-rays and restorations were done when necessary. Overall, over \$8500 worth of dental services were provided to Blacksburg area children during the event.

2005 GKAS Totals:
2086 Children, 27 Volunteers, \$27,104 in Donated Services

Component 7

On February 26, 2005 dentists and other volunteers from the Shenandoah Valley gathered at the J. Frank Hilliard Middle School to host their annual dental health fair. This year's theme of "Surfin' Smiles are Always in Style" brought out 502 area children and



parents who received dental education, screenings and goodie bags. All in all, over 85 volunteers provided nearly \$9,000 in services to those in need. Children and parents were educated and entertained by Sponge Bob Square Pants, the Wisdom Tooth Wizard and others.



Elsewhere in the Shenandoah Valley, Dr. Viglione opened his office on February 4th to 21 Charlottesville-area children. Dr. Viglione's office provided over \$4,000 in exams, prophys, x-rays, fluoride and restorations to those in need.



2005 GKAS Totals:
528 Children & Parents, 94 Volunteers, \$25,079 in Donated Services

Component 8



On February 4, 2005 the members of the NVDS held a very successful GKAS event at the Northern Virginia Community College Dental Hygiene School. Throughout the day, 217 children received services including exams, cleanings, seal-

ants, x-rays and extractions valued at over \$24,000! Volunteers from the NVDS, the NVCC Hygiene School and local dental offices came together to offer much needed dental care to students from 2 area elementary schools and a child and family center. Additionally over 2600 children received education as part of this year's efforts in Northern Virginia, thank you to all who contributed!



2005 GKAS Totals:
2860 Children, 103 Volunteers, \$31,925 in Donated Services



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Is there anything in the world happier than a kid's smile? At Delta Dental, it's always been our mission to work with Virginia's outstanding dentists to make children's smiles as bright and healthy as possible.

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A Delta Dental Program for Youth

how to take care of their teeth through educational programs, and receive transportation to dental appointments. This help is provided to those children who are under-insured or who have no insurance.

Teeth on the Go!™ is another innovative approach to children's dental care. Working with the Virginia Department of Education, Delta Dental is making an educational "tool kit" available to elementary schools across Virginia, free of charge. It helps kids make a commitment to taking care of their teeth — now and for a lifetime.



We'd like to thank all the Virginia dentists who help make these programs succeed.



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Roanoke, Virginia 24014

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Continued From Page 37

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Ms. Patricia Vidals
Dr. William Viglione
Dr. Gus Vlahos
Mr. Tim Wade, Jr.
Mr. Chris Walker
LaVater Walker
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Stefanie Wong
Amanda Woodruff
Vimelda Woods
Margaret Wynne
Christy Yates
Selma Yüce
Drew Zima
Kelly Zubowsky
Dr. Richard Taliaferro

Welcome New Members!

Tidewater Dental Association –

Dr. Gregory Hutchins received his DDS from VCU School of Dentistry in 1982 and his Certificate in Orthodontics in 1984. He was a member of the VDA from 1984-2002. This January, Dr. Hutchins returned to the Norfolk area and took over Dr. Stephanie Meader's solo orthodontic practice located near Old Dominion University, his Alma Mater.

Dr. Pia Sweeney received her DDS from Georgetown University in 1989. She has been a member of the Maryland State Dental Association from 1995-2004. Dr. Sweeney is currently practicing dentistry with Associated Dental Care in Virginia Beach, VA.

Dr. Fletcher Fosque received his DDS from VCU School of Dentistry in 1979. Dr. Fosque is currently practicing dentistry in Onancock, VA. Welcome Back!

Dr. Kelly L. Bussey received her DDS from VCU School of Dentistry in 1999. Dr. Bussey then attended Louisville School of Dentistry in Kentucky where she received her Certificate in Endodontics. Dr. Bussey is now busy practicing with her father in Virginia Beach, VA.

Peninsula Dental Society –

Dr. Lisa Hoffman received her DDS from VCU School of Dentistry in 2004. Dr. Hoffman is cur-

Continued On Page 45

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Washington DC
July 13-17, 2005



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Dr. Diana Marchibroda
Peggy Marietta
Jenica Marquis
Richard Marshall
Christie Martell
Gabriel Martin
Jennifer Martin
Dr. Stuart Martin
Kathy Marrin
Sr. Monty Martin
Mary Martinez
Mim Martinez
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The Governor, in the Budget that he proposed to the General Assembly in December, added an additional \$5.9 million for Medicaid dental service reimbursements. This was approximately a 10% increase.

Members of the VDA approached individual legislators across the Commonwealth, and a representative delegation of the VDA appeared before the various public hearings held on the Budget prior to the convening of the 2005 General Assembly Session.

While expressing gratitude for the Governor's 10% increase, VDA representatives underscored the fact that a 10% increase would not solve the problem.

It was noted that Medicaid allowable fees, even with the 10% increase, would continue to fall well below the average commercial fee paid for the same procedure.

The General Assembly heard your message about these Medicaid children who need assistance. An additional \$10.8 million was added to the Budget by the Budget Conferees to cover Medicaid dental services. A total of some \$16.7 million in new funding, both state and federal, will be available starting July 1, 2005, to assist children in the Medicaid, FAMIS, and SCHIP programs.

With these additional funds available, it is imperative that dentists across the Commonwealth participate in the Medicaid program. An RFP is being processed currently, which will make the program a fee-for-service program across the entire Commonwealth. Bids are being reviewed to have a private entity administer the program, and dentists were involved in establishing the criteria of that RFP.

The ball is in your court now to assist in this effort.

Also on the budgetary front impacting dentistry, several other items worth reviewing were passed. They include:

- Northern Neck Free Clinic: \$200,000
- St. Mary's Health Wagon: \$50,000
- Piedmont Virginia Dental Health Foundation: \$25,000
- Charlottesville Dental Access Project: \$25,000

A language amendment was also approved authorizing Medicaid payments for a VCU Faculty Affiliated Dentist and Pediatric Residency Program. The General Fund match for federal Medicaid payments would be made by VCU. In the past, federal Graduate Medical Education funding was available to partially support pediatric dental services for indigent/uninsured patients. Federal

Continued On Page 46



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rently practicing dentistry in Hampton, VA.

Southside Dental Society –

Dr. June Keller Vernon received her DDS from VCU School of Dentistry in 1989. Dr. Vernon is currently practicing dentistry in Colonial Heights, VA.

Dr. Michael Smith received his DDS from VCU School of Dentistry in 1996. Dr. Smith is currently practicing dentistry at the Central Virginia Health Services in New Canton, VA.

Dr. Bridget A Reilly-Sheahan received her DDS from VCU School of Dentistry in 2003. Dr. Sheahan is currently practicing at the Dailey Planet in Richmond as well as working one day a week as an associate with Dr. Richard Bates in Colonial Heights, Va.

Richmond Dental Society –

Dr. Renita Randolph received her DDS from VCU School of Dentistry in 1991. Dr. Randolph has recently relocated from Roanoke, VA to the Richmond, VA area.

Dr. Steven Lubbe received his DDS from the University of Kentucky in 1998 and his Certificate in Pediatric Dentistry in 2000. Dr. Lubbe is currently practicing at the Pediatric Dentistry and Orthodontics of VA in Richmond, VA.

Dr. Ross Wlodawsky received his DDS from VCU School of Dentistry in 2000 and his Certificate in Oral and Maxillofacial Surgery in 2004. Dr. Wlodawsky is currently practicing with Drs. Niamtu, Alexander, Keeney, Harris, Metzger, Dymon, and Associates in the Richmond, VA area.

Dr. Edward Thomason received his DDS from VCU School of Dentistry in 1999. Dr. Thomason recently moved from the state of Washington and is currently practicing in Richmond, VA.

Dr. Melanie Boone received her DDS from Howard University College of Dentistry in 1999 and her AEGD in 2000. Dr. Boone is currently practicing

dentistry in Richmond, VA.

Dr. Narjes Abtahi received her DDS from VCU School of Dentistry in 2003. Dr. Abtahi is currently practicing dentistry in Mechanicsville, VA.

Piedmont Dental Association-

Dr. C. Wellsley Smith received his DDS from Howard University in 1967. He currently transferred his tripartite membership from Maryland to Virginia where he is doing contract work for Cathy Ford.

Dr. Robert Raymond Blake received his DDS from VCU School of Dentistry in 1983. Dr. Blake is currently practicing dentistry with Davis, Blake, & Howard P.C. in Lynchburg, VA.

Southwest Virginia-

Dr. Julie Ferguson received her DDS from VCU School of Dentistry in 2004. Dr. Ferguson is currently practicing dentistry with Dr. F. Anne Johnston in Abingdon, VA.

Dr. Justin Ferguson received his DDS from VCU School of Dentistry in 2004. Dr. Ferguson is currently practicing dentistry with Lebanon Family Dentistry located in Lebanon, VA.

Shenandoah Valley Dental Association-

Dr. Phillip Pandolfi received his DDS from University of Louisville in 1987. He then received his Certificate in Oral Maxillofacial Surgery in 1999. Dr. Pandolfi is currently practicing with Dr. James Whitney in Harrisonburg, VA.

Dr. Adam Salzberg received his DDS from VCU School of Dentistry in 2003. Dr. Salzberg is currently practicing dentistry in Charlottesville, VA.

Meetings & Events

April 30- May 1, 2005
VDA Leadership Retreat
Florence Elston Inn and Conference Center
Sweet Briar College
Amherst, VA

June 16-19, 2005
VDA Committee Meetings
Hilton Oceanfront
Virginia Beach, VA

September 14-18, 2005
VDA Annual Meeting
Marriott - Richmond, VA

September 13-17, 2006
VDA Annual Meeting
Hotel Roanoke & Conference Center

June 16 & 17, 2007
VDA Annual Meeting (Exhibits, CE & Social)
Waterside Marriott - Norfolk, VA

Component CE Programs - For registration information, contact the appropriate person below:

Component I (Tidewater) (Executive Secretary)	Virginia Donne (757) 491-4626
Component II (Peninsula) (Executive Secretary)	Kathy Harris (757) 565-6564
Component III (Southside) (President)	Dr. Kent Yandle (804) 862-4416
Component IV (Richmond) (Executive Secretary)	Linda Simon (804) 323-5191
Component V (Piedmont) (Executive Secretary)	Ann Huffman (276) 732-3789
Component VI (Southwest) (Executive Secretary)	Sonya Ferris (276) 628-4934
Component VII (Shenandoah) (Executive Secretary)	Kathy Silwoski (540) 885-4344
Component VIII (Northern VA) (Executive Director)	Susann W. Hamilton (703) 642-5297

VAGD Programs - please contact Frances Kimbrough (Executive Secretary) at 804-320-8803.

VCU School of Dentistry - please contact Martha Clements at 804-828-0869.
www.dentistry.vcu.edu/ce/courses.shtml

VCU School of Medicine (Anatomy Dept) - please contact Dr. Hugo Seibel at 804-828-9791.

VAE - please contact Dr. Timothy J. Golian at 703-273-8798.

VSOMS and VAO - please contact Nicole Pugar at 804-261-1610.

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budget reductions resulted in a loss of approximately \$1 million for the pediatric residency program. The language adopted by the Budget sets up a payment schedule that would restore about one-half of that reduction.

Assignment of Benefits:

As noted earlier, the VDA took a position of monitoring the Assignment of Benefits legislation introduced by the Medical Society of Virginia.

The position of the VDA was very simple. We wanted to make certain

that the current dental Assignment of Benefits (legislation approved in 1999) was not harmed during the legislative give-and-take over the Medical Society's legislation.

At the end of the day, the Medical Society secured a watered-down version of what they had introduced. This basically requires insurance carriers to continue the dialogue with the Medical Society of Virginia to try to find appropriate ways to resolve the issue.

No damage was done to the dental Assignment of Benefits statute currently on the books.

Looking Ahead:

2005 is an important election year. All 100 seats in the House of Delegates and the Governor, Lieutenant Governor and Attorney General stand for election. You, as a member of the VDA, need to be involved in that process. You need to get to know your local legislators. And you need to follow closely the statewide races.

Equally as important, you need to be a participant in VADPAC. Campaigns in Virginia are some of the most expensive, if not the most expensive, in the entire country. If the VDA is to continue to be a voice for your patients, you must continue to be active participants, both from a personal standpoint as well as a financial standpoint, in the process.

Thanks for what you have done, and we ask that you continue to provide your support.

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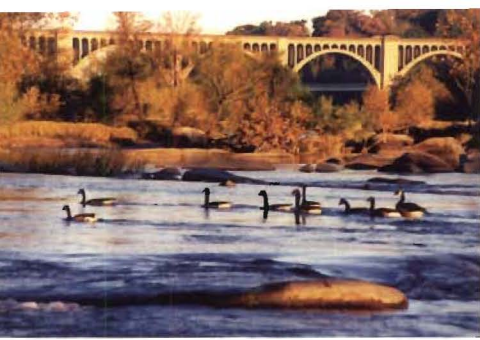


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Thursday, September 15, 2005

Dr. Mitch Conditt - Total Esthetics For The Everyday Practice

Robert Marbach - Mastering The Art Of Cosmetic And Restorative Dentistry: A Technician's Perspective

Friday, September 16, 2005

Vivian Biggers - Adult Heartsaver CPR

ADA Speaker (TBA) - HIPPA

Biolase - Lasers

Dr. Brian K. Smith - Diagnosis and Treatment of Medical Emergencies in the Dental Setting

Dr. Hal Meador - Biocentrics (Lecture Portion)

Dr. Hal Meador - Biocentrics Hands-On Scaling

Dr. Jeffery Hoos - Balancing: the Art, Science and Business of Dentistry

Dr. Mike DiTolla - Crown and Bridge

Dr. Baxter Perkinson - Watercolors Through The Eyes Of A Dentist

Janet Forte - Enhancing Dental Professionals Response to Domestic Violence

Dr. Jim Grisdale - Perio Surgery

Suzanne Boswell - Dental Dream Team

Suzanne Boswell - The Angry Patient

Tom Bridenstine - Managed Care: Insurance

Saturday, September 17, 2005

Dr. Charles Wakefield - Restorative Materials: What, When, Where and How

Dr. George Bruder - Comparison of Endodontic Equipment

Dr. Hal Meador - Biocentrics Hands-On Scaling

Alan Cates - Planning In A Time Of Tax Law Change

Mary Costello - Dam It, It's Easy (Basic)

Gerald Canaan/Dave Lionberger - Risk/Practice Management

Dr. Jeffery Hoos - Changing Your Denture Patient into a Dental Patient

Dr. Russell Baer - Simple Implant Restoration

Dr. Jim Grisdale - Perio Surgery

Dr. John Novak - New Non-Surgical Approaches for Treating Moderate to Severe Periodontitis

Dr. Hal Meador - Biocentrics Hands-On Scaling

Mary Costello - Dam It, It's Easy (Advanced)

Check The Website At www.vadental.org for more meeting information!



- Certosimo, Alfred J
 Cheng, George S
 Ciccone, Robert J
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 Zier, Tara E
 Zimmet, Paul N
 Zwiibel, Burton C

Practice
 Niamtu, Alexander, Kceney, Har-
 ris, Metzger, and Dymon

Other
 Darrell Bailey

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Student News

Submitted by: Leslie Pinkston, VDA Director of Membership Services

January's Lunch and Learn – The Virginia Dental Association hosted the Senior Transition Program on January 28, 2005. Dr. Wilson Jewell, 16th District representative, from Wilmington, North Carolina gave a power point presentation conveying the resources available at the ADA and VDA to help make the student's transition to practice easier and more rewarding. Dr. Gary Hartman, an endodontist from Virginia Beach, gave his perspective from a specialist's point of view and spoke to the students about opening a new practice as a specialist. Dr. Krista Woodlock, also from Virginia Beach spoke to the students about her experiences as an associate dentist and then opening up her own private practice. The VDA thanks all three of these dentist for their support of the VDA and the VCU School of Dentistry!

February's Lunch and Learn – The

Virginia Dental Association hosted a Diversity Lunch and Learn on February 8, 2005. The goal of this program was to convey the idea that diversity encompasses much more than just ethnicity. Dr. Sharon Colvin, from Chesapeake, VA, spoke to the students during their lunch hour. Dr. Colvin shared some of her experiences as a Navy dentist, a Correctional Center dentist, and her final career experience of opening her own private practice! Dr. Elizabeth Nance also spoke to the students regarding her experience as a working dentist in a private practice setting and the transition of becoming a faculty member and teaching dental students. Thank you Dr. Colvin and Dr. Nance!

Cosmetic Dentistry CE – The Virginia Dental Associations New Dentist Committee sponsored lunch for the dental students Saturday, February 19, 2005.

Dr. Baxter Perkinson did an all day CE class on Cosmetic Dentistry.

March's Dinner and Learn - The Virginia Dental Association hosted a Dinner and Learn on March 7, 2005. Gerald Canaan II, Esquire, gave a presentation on Dentistry and the Law in Virginia. Mr. Canaan is an attorney with the firm of Hancock, Daniel, Johnson & Nagle, P.C. in Glen Allen, VA, and he specializes in representing health care professionals throughout Virginia. GE Insurance Solutions gave a presentation on Professional Liability Insurance, how it works and why you should care. Larry Bedsole of B&B Insurance, VDA Endorsed Agent, was available to answer all insurance questions. Many thanks to B&B Insurance for sponsoring dinner!

ADA Delegation Report

Dr. Wallace L. Huff, 2004 Chair

November 16, 2004

The 145th annual session of the ADA was held in Orlando, Florida with most of the activities taking place at the Orange County Convention Center. Approximately 35,872 dentists, dental team members, students, exhibitors and guests were in attendance.

Some of the top attractions included: tennis star Venus Williams (Colgate-Pamolive); ADA/Sonic speakers, former British Prime Minister John Major and Astronaut James Lovell; comedian, Bill Cosby and an evening of entertainment put on by Universal Studio.

Dr. John Olmstead, Chair, of the Council on ADA Sessions is to be congratulated for a job well done. John is a practicing endodontist from North Carolina.

Dr. Richard Haught, a general practitioner from Tulsa, OK, was installed as the 144th president of the ADA. Dr. Robert Brandjord, oral and maxillofacial surgeon from Prairie, MN, was elected president-elect. Dr. Robert T. Ferris, periodontist from Altamonte Springs, FL, was elected second vice-president and Dr. Ronald Bushick, Boothwyn, PA, moved up to first vice-president. Dr. Thomas Soliday, Gaithersburg, MD, was re-elected Speaker of the House and Dr. Mark J. Feldman, East Hills, New York, continues to serve as treasurer.

Five new trustees were installed on the Board of Trustees: 6th District - Dr. Charles L. Smith, Charleston, WV; 7th District - Dr. Jeanne Marie Nicolette, Columbus, OH; 10th District - Dr. Kathryn A. Kell, Davenport, IA; 16th District - Ronald L. Tankersley, Newport News, VA and 17th District - Dr. Donald I. Cadle, Jr., Newport Richey, FL.

This year the reference committees were consolidated from seven to five. This was done to increase the efficiency of these meetings and to allow delegates the opportunity to attend more committee hearings. To address the concerns of the House of Delegates that fewer committees would reduce volunteer opportunities to serve, Resolution 21 was approved by the HOD to increase the number serving on the reference committees from eight to nine members beginning in 2005.

Budget:

The HOD approved the 2005 budget with \$94.2 million in revenue and \$95.3 million in expenses. The Board of Trustees made the recommendation to cover the \$1.1 million deficit with reserve funds and the House voted to keep the dues at the current level of \$435.00. This is the second year in a row that there will be

no dues increase. There is a \$30.00 special assessment still on going for renovation of Association spaces in the ADA headquarters building in Chicago. The 2005 budget is the 5th year of the 6 year assessment.

This was the year when access to care, licensure and accreditation were the hotly debated topics, along with insurance issues where diagnostic codes are being attached to our reimbursement codes. As the dental profession changes with the needs of the public, there is much discussion for the development of a national uniform licensure process and the questions being asked are: (1) who develops the exam? The ADA or the examiners? and (2) who administers the exams?

With national licensure issues, there is the same concern with accreditation, such as the pros and cons of international accreditation and the local concerns of border states. As our Trustee, Carrol Player, said "We need to think with a global perspective, yet at the same time, adhere to our strong beliefs of maintaining high standards in education, licensure and accreditation." Dr. Roger Wood will chair the Council on Dental Education/Licensure next year. Drs. Ron Hunt and Joan Gillespie serve on the Commission on Dental Accreditation with Dean Hunt serving as vice-chair this past year.

Access to Care:

The ADA, in reaffirming its leadership role in better oral health for all Americans and has produced a white paper that will challenge our nation's policy makers to improve access to dental services. This white paper, along with state and community models, was presented on October 1st at the HOD meeting. The white paper not only gives organizations new ideas, but examples of positive changes that are being made. As ADA President, Richard Haught, stated, "the models are blueprints that other states can use when approaching their legislatures in regard to improving access to dental services in Medicaid and other public programs."

Nationally we already have the GKAS Program which is the Association's annual access to care for indigent children. In fact, while the ADA House of Delegates was in session in Orlando, the US House of Representatives adopted resolution HR 576 that honors the GHAS Program and all those associated with it. Representative Eric Cantor, Richmond, sponsored the bill. In Virginia we have already shown our commitment to increase critically needed oral health services to underserved areas (populations) with the Mission of Mercy (MOM) Projects.

R 44 - A vision statement on access for the underserved, requests that the ADA work with all policy makers to improve oral health and

urge the nation to support programs and policies that recognize that oral health is integral to over all health, to acknowledge that the degree of oral health disparities is unacceptable and to implement market-based solutions.

R 55 - Requires the federally qualified health centers (FQHC's) to issue an annual report and to make available, upon request, the details of the funds they receive, the types of patients treated, the number and type they receive and the types of services provided using the current CDT codes.

R 24 - Dealing with the Alaska oral health access issue, was in response to the Alaska Native Oral Health Access Task Force. In this Resolution 14 strategies were developed to support primary and expanded dental health aid concepts, but the resolution opposes non-dentist making diagnoses, developing treatment plans and performing irreversible procedures. As of this writing the US congress-House Resources committee's version of the Indian Health Care Improvement Act (HR 2440) now includes the language that ensures that no dental health aid will be certified to perform treatment of dental caries, extractions and pulpotomies. But SB 556, as of this date November 16, 2004, does not contain this language. I'm optimistic that through the effort of our action team leaders and state coordinators this can be and will be accomplished.

R 90 - Requests the appropriate agencies of the ADA to investigate the feasibility of utilizing new or existing accredited dental residency programs in Alaska.

R 36 - Asks the ADA to seek services for military reserve forces to help improve dental access and to explore helping with the Alaska Oral health Access

Licensure:

R 23 - Calls for the ADA president to appoint a National Clinical Licensing Examination Consensus Committee to advance the development of a common national exam for the evaluation of clinical competency of all candidates for licensure. This Committee is to report back to the 2005 House of Delegates. Past ADA President Howard Jones, Chair of the Task Force on Patient-Based Examinations stated that many good things have happened in the past few years concerning this issue and he feels that this is due to a general openness in seeking mutually agreeable solutions from all those involved in the licensure process. As a background to this, the HOD in R 114H-2001 directed the Task Force on Patient-Based Exams to have equal representation from all those involved in the licensure process: the ADA, AADE (American Association of Dental Examiners) ADEA (American Dental Education Association) ASDA (American Student

Dental Association) and the Committee on the New Dentist.

Dr. John Cosby, Jr., AADE president, agreed with Dr. Jones and added that the AADE had been making tremendous progress on the development of a uniform examination process stating that seventy-five (75) percent of a national clinical licensure exam has already been developed. Stay tuned – there will definitely be more to come on this in the months ahead. As stated before, Roger Wood will chair the Council on Dental Education and Licensure this coming year 2004-05 and I am sure Roger will represent us well as this licensure process unfolds.

Accreditation:

R 41-H - Gave the Commission on Dental Accreditation the go ahead to establish services for consultation and evaluation internationally. This Resolution urges CODA, to make available, if requested, fee based consulting services and evaluation to international dental schools preparing general dentists for practice. The commission is to also develop a business plan that would show how these services would become self-sufficient within three years of implementation and recover start-up costs within 6 years.

R 40 – Changes the bylaws regarding CODA membership. The change indicates that four members of CODA shall be selected from nomination, which will be open to all trustee districts, rather than being selected.

At this time when there have been a lot of ADA members called to active duty in the armed forces the House of Delegates passed several resolutions which show support for members serving in the military: R 66-2003 – amends the ADA Bylaws by adding a dues waiver for members temporarily activated to Federal Reserve.

Res. 66Hb – Urges constituent and component dental associations to do the same.

R 57H-2004 – Calls for the ADA foundation to establish a low interest loan program for dentists who are temporarily activated and have to be away from their office more than three months.

Other Resolutions:

The HOD referred three resolutions on the ADA's opposition to the ADHA's "advanced dental hygiene practitioner". The ADA opposes creation of an "advanced dental hygiene practitioner" as proposed by the ADHA to allow diagnosing, providing restorative and definitive dental care without the direct or indirect supervision of a dentist.

R 12-5-1-2004 – Restores the Student Block Program funding paid to eligible constitu-

ent dental societies (in the amount of up to \$3,000.00 per dental school year) for the ADA Student Outreach Program.

R 28H-2004 – Adopted by the HOD to include tongue splitting in its stance against intraoral piercing. The ADA recommends that all members discourage patients who request these procedures by educating them about the associated risks.

I want to thank Chuck Norman, Chair of the 16th District Caucus for his leadership this year. Even though our pre-ADA convention caucus at the fabulous Grove Park Inn, Asheville, NC was cancelled due to the hurricane, Chuck did a fantastic job of keeping everyone informed and updated throughout the 16th District Caucus in Orlando. Thank you Chuck!

I also want to thank all the members of the Virginia delegation for their contributions in making this time a success. A special thanks to Alonzo Bell and Ted Sherwin who did a superb job as reporting chairs for their reference committee. This was both Alonzo's and Ted's first time with the delegation.

Congratulations and thanks to:

- Dr. M. Joan Gillespie – elected chair of the Virginia delegation to the ADA
- Dr. Richard Barnes – elected vice chair of the Virginia delegation to the ADA
- Dr. Roger Wood – elected chair of the Council on Dental Education and Licensure
- Dr. Bruce DeGinder – elected vice president of the Academy of General Dentistry this past summer
- Dr. David A. Whiston – received the ADA's Distinguished Service Award
- Northern Virginia Dental Society – won the 16th Annual AFDA Golden Apple Award (excellence in science fair program support and promotion. Northern Virginia Dental Society won the award for "sponsoring the future of dentistry"
- Dr. Jim Harrell, ADA delegate from North Carolina – ran for the US Congress from North Carolina's 5th District. Jim we thank you for your dedication and service
- Dr. Bruce Hutchison – elected chair of the 16th District Caucus
- Dr. Charlie Norwood, congressman from Georgia and friend of dentistry – successful lung transplant. Charlie, our prayers are with you
- Dr. Ron Tankersley – new trustee for the 16th District. Ron will represent the 16th with distinction

Members of the Virginia Delegation serving on ADA Councils and Special Committees:

- Dr. Bruce Hutchison – Council on Ethics, Bylaws & Judicial Affairs

- Dr. Dave Anderson – Chair of Council on Communications
- Dr. Gus Vlahos – ADPAC
- Dr. Ron Hunt – Vice Chair of Commission on Dental Accreditation
- Dr. Roger Wood – Chair of Council on Dental Education & Licensure
- Dr. M. Joan Gillespie – Commission on Dental Accreditation
- Dr. Alonzo Bell – Council on Communications
- Dr. Terry Dickinson – National Advisory Council to the National Health Service Corp
- Dr. Charlie Curtino – Dental Content Committee

Future Meetings:

- 2005 16th District Caucus - September 23-25, Norfolk, VA – Virginia hosting
- 2005 ADA House of Delegates – October 7-11, Philadelphia, PA

This was my last caucus as a delegate and as your delegation chair. It has indeed been an honor for me to serve with all of you. It has been said that the 16th District is the most respected and knowledgeable district in the ADA. I know that is true, but I also know that the Virginia delegation shines the brightest within the district. Thanks to all of you. One of the reasons for our success is in no small measure due to your new chair, Joan Gillespie. As your delegation chair I know Joan will make sure you are always prepared – just follow Joan's example!

I leave you with this: The first rule of good teamwork is to learn the rules. The second is to play by them. May god bless each of you now and in the years to come. Thank you for your commitment to dentistry and the VDA.



Donate Dental Services Receives \$10,000 Grant from John Randolph Foundation

Donated Dental Services (DDS) would like to thank the John Randolph Foundation for their generous grant of \$10,000 received in January 2005. These funds will be used to support the program's administration of free dental services to elderly and disabled persons in the Southside area. The John Randolph Foundation supports health programs and services in the City of Hopewell, Petersburg, Colonial Heights, and the surrounding counties of Dinwiddie, Surry, Sussex, Charles City, and Prince George, including adjacent sections of Chesapeake and Henrico.

COMPONENT NEWS

Component I Tidewater



Dr. Barry Einhorn, Editor

I wonder if old man winter is shooting his last barrel full of winter goodies. We are experiencing a cold and windy rain while you folks in the rest of the state are getting a blanket of snow. Let's hope it is indeed his last volley.

The weather has not diminished the efforts of our component. Under the able direction of **Dr. Tony Peluso** we held our third annual GIVE KIDS A SMILE DAY. It proved to be our best year yet. A total of 91 patients were evaluated at the ODU School of Dental Hygiene's clinic in Norfolk on Saturday, February 5, 2005. In addition to taking bitewing radiographs and providing brushing supplies to each patient a total of 233 sealants were placed. Collectively over \$12,000 in donated supplies and services were provided.

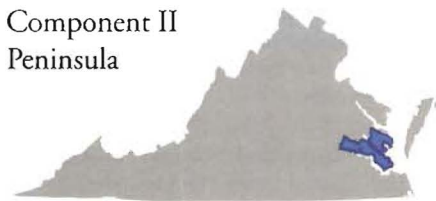
The program was a joint effort of The Tidewater Dental Society, the G.W. Hirschfeld School of Dental Hygiene of Old Dominion University, The Virginia Health Foundation, Boys and Girls Clubs of Southeast Virginia and the Oral Health Improvement Coalition of South Hampton Roads. We are proud of the effort and of the ability to partner so effectively with other health service agencies in our area.

A number of our colleagues recently decided to hang up their handpieces, They are: **Drs. Arnold Hoffman, Warren Karesh, James Pauley, Bill Higginbotham** and **Norman Weiss**. We wish them good luck as they embark on new endeavors.

Our president, **Dr. Todd Bivans** was asked to assume office when **Dr. Charles Wesley** had to relocate suddenly. In his first message to the membership he promised to pick up the mantle of leadership and move our component forward in the manner of all his predecessors. He has already begun to fulfill his promise.

We look forward to seeing you all in June in Virginia Beach.

Component II Peninsula



Dr. Elizabeth A. Bernhard, Editor

The Peninsula Dental Society met and hosted Dr. Vince Tiller for an all day C.E. course on February 25 2005. This Bristol Tennessee dentist of the famed "Root Camp" presented information on how to easily perform endodontic procedures in one sitting. This meeting was co-sponsored by EndoSolutions, Dexis, and Dodd Dental Lab. Dr. Tiller claimed a lot of the success of doing endo procedures is dependent on Access.

Speaking of Access, 9 PDS Dentists and their assistants and Hygienists participated in "Give Kids A Smile" activities. Again this year we welcomed the participation of the Dental Residents from Langley AFB. Approximately 400 children were screened from Hampton and Newport News. Of note by this screener, in one Newport News school 50 % of the 3rd graders screened had one or more sealants and less than 10% had active decay! Fluoride is working!

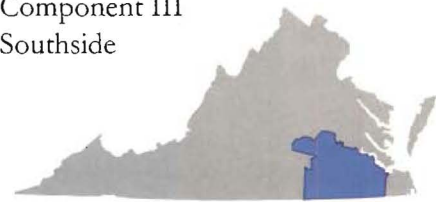
Speaking of Fluoride, PDS members will be introduced to the new fluoride pamphlet being released by the Virginia Department of Health at the March 21st Membership meeting. This pamphlet, developed by Dr. Lisa Syrop, fluoridation coordinator for the state, will have information regarding the high levels of fluoride in wells in the Tidewater area. This brochure also gives information on what people can do to reduce the probability for dental fluorosis. These pamphlets will be available after March 25 for distribution.

For more information on this go to www.vahealth.org/teeth then choose ~Community Water Fluoridation sidebar Educational Materials: "Just the right amount of fluoride."

There will be one more opportunity for

Peninsula dentist to receive C.E. credit at the March meeting. The topic will be "Extraction Complications, Patient Evaluation and Treatment" by Dr. John Leist. There are not many opportunities to take out teeth today with all the available preventive and restorative options but there are always opportunities for complications. Be there so you won't be square. Have a great spring.

Component III Southside



Dr. Mike Hanley, Editor

Greetings from Southside

All the cold and ice have become distant memories south of the James. The generosity of several members on GKAS day will, however live in the memories of over 125 thankful youths.

That's how many were treated with restorations, sealants, extractions and cleanings. Treatment was delivered in several offices in our component. Drs. Galston & Ward, Castro & Smith, Terry, Gokli & Keaton & Lubbe (Both of their offices) and Trotter all offered their facilities for this big effort. Helping them were Drs Yandle, Roadcap, Finkler, Ellis (x 2) and Farrington. Drs Ward & Galston were presented with a Proclamation from Chesterfield County declaring Chesterfield Dental Health Month. Nice job everyone!!!

Our second MINI-MOM at the Petersburg Urban Ministry is on March 12th. I will report on the success of this endeavor in my next column.

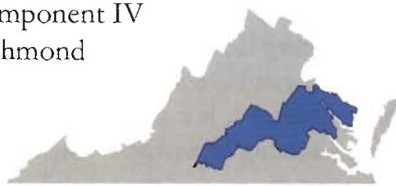
We had a SRO crowd for our annual OSHA Update with the internationally acclaimed academician, lecturer, raconteur, bon vivant, middle distance runner, and oral pathologist- the nonpareil John Svirsky. We all came away from the meeting with a greater appreciation for what it takes to protect each other in the workplace. Also, BOPIM has no place on the rim of your coffee mug.

Key West? Park City? San Diego? None of

these places offered more than Southside to four new members of our component. All are graduates of VCU School of Dentistry. Dr Michael Smith is a 96 grad working for Central Virginia Health Services in New Canton, Dr Shannon Bowman works for the same agency in Hopewell. She is a 2004 Grad. Dr Bridget Reilly-Sheahan is a 2003 Grad and works at the Dailey Planet in Richmond and also in the office of Dr Rich Bates. Dr J. Keller Vernon is an 89 grad and practices in Colonial Heights. Welcome to all of you!!! With this infusion of new blood the average age in our component is now under 70.

And now it's time to dust off the clubs and once again show Dr. Ellis "Who's Your Daddy?" See you in June.

Component IV Richmond



Dr. Roger E. Wood, Editor

Dr. J. Ross McClung was our guest on January 20, 2005. He is Professor of Anatomy, VCU School of Dentistry, and spoke on "Head and Neck Anatomy." Dr. McClung concentrated on the many branches of the Trigeminal Nerve. It was evident that he thoroughly enjoys teaching and making his subject interesting. The meeting was our first at The Westwood Club. We are still looking for a "permanent" location after the closing of the Capitol Club in November, 2004.

The February meeting was held on February 17, 2005, with Dr. Joseph Niamtu, III. He was both entertaining and informative with his subject, "Facial Aging and New Techniques in Cosmetic Facial Surgery." Dr. Niamtu stressed that cosmetic facial surgery was his passion, and it showed.

Component IV had an extremely successful "Give Kids a Smile Day" on February 4, 2005. The GKAS Day was held at the Boys and Girls Club of Richmond for the second year. The partnership of The Boys and Girls Club and the Richmond Dental

Society has tremendously improved GKAS Day. Last year we saw 425 children, and this year we saw 753 children. The Alliance saw about 85 children on Saturday at this GKAS Day. All children were provided dental examinations, dental prophylaxes, and topical fluoride treatments. Thanks to the many VCU Dental and Hygiene students who made this day so successful! Bill Hall from Benco and Shannon Hartman from Sullivan-Schein are to be commended for getting all the dental units operating and making sure there was no "down time." Proctor and Gamble again provided Crest toothpaste and toothbrushes for all the children. We are now in the process of asking for volunteer dentists to treat the 98 children who were deemed to need urgent care. That should not be a difficult task due to the great cooperation of the Component IV members.

Our February 18, 2005, CE course with Dr. Gordon Christiansen was Sold Out! We are expecting the same turnout with Dr. Ray Bertolotti when he presents "Contemporary Bondodontics" on April 8, 2005.

Have a great Spring!

Component V Piedmont



Dr. David Black, Editor

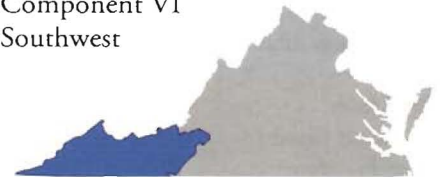
By the time you receive this message, our Spring Meeting will probably be over. We will be having this meeting on April 8-9th at the Homestead Resort. Our speaker is the renowned cosmetic dentist, Larry Rosenthal from NYC, and our Saturday activity will be golf on the equally renowned Upper Cascades Golf Course. As I write this in mid-February, we already have a good sign-up for the course. If you think you would enjoy doing this again in the near future, speak to our officers at the state meetings to encourage the new officers to repeat this type meeting at this type resort. We can only do this if we have sufficient attendance to warrant the expense.

Some component members attended the Committee meetings and the "Day on the Hill", visiting our legislators in January.

That is an interesting and important day, because everyone is pulling at our legislators to affect the legislation that is coming before them. If we don't tell them our needs, someone else will, and we may not like the result.

I would close by encouraging our local members to volunteer to be on boards, committees, and become local and state dental officers. We have four distinct regions in our component, and it is hard for the board to get together enough to encourage dentists from these areas to get involved in the leadership of our component. If anyone is interested in board work for our component or helping on a committee, please contact Ann Huffman, our executive secretary at (276) 732-3789 or David Black, the current president at (540) 342-7865.

Component VI Southwest



Dr. Cynthia Southern, Editor

Greetings from the "Snowy Southwest". We are excited about the month of February. We have numerous dentists participating in the Give Kids a Smile Day. Children are being treated in various offices. Children are also receiving dental education by dentists, assistants and hygienists at numerous schools. The response to help children in need has been amazing. Thank you to all who pitched in to make this a success.

Our fall component meeting was held on November 12, 2004 at the Donaldson Brown Conference Center, Blacksburg Virginia. We have exciting continuing education coming this spring. On March 11, 2005 we welcome Dr. Richard F. Jackson to the Wohlfahrt Haus in Wytheville, Virginia "Advancing Technologies in Oral Surgery for the General Practitioner". Also May 20 through May 22, 2005 our Pipestem, West Virginia retreat. We welcome Dr. Jim Lance to discuss Endodontics. Don't miss out on this fun-filled weekend. Be sure to bring the family for golf, swimming, horseback riding and barbecue. Lastly, we will have our summer component meeting August 12, 2005 at the SWVA Higher Education Center in

Abingdon. We welcome Dr. Kenneth Shay discussing "Older Patients: Clinical Challenges and Practical Approaches".

Component VII Shenandoah Valley



Dr. Harry M. Sartelle, III, Sec.-Treasurer

Greetings from the Valley of Virginia. By the time you have read this, our component will have held its spring meeting at the Boar's Head Inn in Charlottesville. Our speaker will be Pamela Smith, R.D., a best-selling author and nutritionist. The topic of her seminar is: **Forever Young: Targeting Immune Boosting Power for a Healthy Mouth and Lifelong Wellness.**

Also at this meeting, we presented our slate of new officers:

President:	Ron Downey
President-Elect:	Jay Knight
Vice-President:	Richard Taliaferro
Secretary-Treasurer:	Harry Sartelle

Dr. Taliaferro, our representative on the Direct Reimbursement Committee, reminds our members to review the CD they received from the VDA office. If you know of any business interested in a direct reimbursement or direct assignment plan, please let Dr. Taliaferro or the state VDA office know.

Of interest to our members from the Dental Practice Regulations Committee, Dr. Downey reports that the committee voted unanimously in favor of the proposal of licensed dental hygienists administering local anesthetic and nitrous oxide at the direction of and under direct supervision by a licensed dentist after completing a course required by the Board of Dentistry. The Committee also unanimously passed a proposal that supragingival scaling can be delegated to a dental assistant under the direct supervision of a licensed dentist provided the Board of Dentistry administer the appropriate training. The Component is in discussion with the Charlottesville-Albemarle Dental Society to co-sponsor the fall meeting. Dr. Ron Jackson will be the speaker and the date is October 7. Other meetings to put on your calendar are the

VDA Committee meetings in Virginia Beach, June 16-19 and the VDA Annual Meeting September 14-18 in Richmond.

We would like to recognize two of our members for distinguished awards. Dr. Mac Garrison, Harrisonburg, was inducted into the American College of Dentists at the ADA Convention in Orlando. Dr. Ron Downey, Lexington, received a Fellowship in the International College of Oral Implantologists at the January meeting of the ICOI in Miami. At the Component Seven Executive Committee meeting, a motion was passed to allow any new dentist practicing in the geographical boundaries of the component a free pass to the component meetings during the first year of practice.

We encourage our members to take a new dentist to lunch and share the many benefits of belonging to the Shenandoah Valley Dental Association, the VDA and the ADA.

Component VIII Northern Virginia



Dr. Scott McQuiston, Editor

What a tremendous time we had during Give Kids a Smile day. The event was a great success under the direction of Dr. Brenda Young. Fortunately, the weather held out and 215 children showed for the event. All in all 102 volunteers donated their time to this worthwhile cause performing prophies, exams, sealants and a few extractions. We even identified many children who could return for further, more comprehensive treatment at the M.O.M. project in April. Special thanks goes out to the Northern Virginia Community College dental hygiene students who participated and to the College, which supplied the beautiful clinic. Again, Sullivan-Schein donated much time and materials to help make it a success. Bertucci's, Dominos and Chic-Fil-A donated food, to end a perfect day with the camaraderie of

colleagues and friends. Thanks Brenda for all your hard, diligent work on this project.

In February, Dr John West delivered an informative lecture titled, "The Total Endodontic Experience". It was well received and much less boring than instrumenting and flaring a maxillary second molar. In March one of the great implantologist of our time, Dr. Carl Misch, spoke on implant related topics. He's a plethora of information! An engineer of the mouth you might say. Thanks to Dr. Garret Gouldin for putting together a well-rounded and informative C.E. program this past year.

Finally, in April the much-anticipated M.O.M. project is coming to our area. To be held at the Northern Virginia Community College, dental hygiene clinic. If you have never participated in this project it is a meaningful and heart warming experience. The clinic is state of the art and the solidarity is second to none. Give it a try. It'll do you good!

All Component News Is Submitted On A Volunteer Basis By Your Component Secretary. To Learn More About Specific Events, Or To Find Out More About Upcoming Events In Your Component, Please Contact Your Component Secretary.

Alliance News

Shirley S. Meade, President

The Virginia Alliance has been able to help support the MCV Clinical Simulation Campaign (\$1000.00) and the Donated Dental Services program sponsored by the VDA (\$1500.00). This funding is made possible by our sales of children's bibs and onesies with "I Love My Dentist. He's/She's My Dad/Grandpa/Mom", by our sales of jewelry items, and the sale of the new AADA cookbook, Dishing Up Smiles. To purchase any of these items, please contact Shirley @ 804-796-2002, or shirleymeade@comcast.net.

The AADA 2005 Leadership Conference was held February 23-26 at the Hyatt Regency Savannah. Five Virginia Alliance members attended; Shirley Meade, Barbara Yandle, Sandy Parks, Allene Rice, and Dottie Hendricksen. The first day of Conference was Leadership/Membership Day. Led by Joel Deceuster of San Jose, California AADA attendees went through a ten step process for making the next 12 months their most successful ever as a member of the Alliance. Lunch on this day was the annual Beulah K. Spencer New Member Service Award Luncheon, which recognized those who have been members of the Alliance 5 years or less, and rendered outstanding service to the Alliance. The Luncheon also served as the kick off to AADA's 50th anniversary celebration. The second day of Conference was Dental Health Education Day. During the morning session several DHE projects were presented, including one by our own Dottie Hendricksen of Lynchburg, using ADA materials about "Careers in Dentistry". Mr. John Klyop, director of the ADA's Council on Access, Prevention and Interprofessional Relations (CAPIR), highlighted the Council's programs and activities. He emphasized areas members of the Alliance may wish to assist the Council, especially with access to care initiatives. Our next speaker was Dr. Stephen O. Glenn, past president of the Oklahoma Dental Association. Dr. Glenn updated members on the issue of "pouring rights contracts" and ways Alliance members can help "stop the pop". The third day of Conference was Legislative /Advocacy Day. Attendees heard from Dr. Ty Ivy, a member of the ADA Alaska Task Force, who updated members on the important issue of the Indian Health Care Improvement Act (H.R. 2440/S. 556) that would allow dental health aide therapists (DHATs) to perform several invasive and irreversible dental procedures. He emphasized the role Alliance members can play in influencing public policy. We also heard from Dr. Ed Vigna, ADPAC Chairman. He spoke on the role ADPAC plays besides collecting and distributing money, including grassroots efforts, education and the vital role the Alliance plays. The morning concluded with the Legislative Luncheon. The Alliance was delighted to have Senator Regina Thomas of Savannah as the guest speaker. AADA President Jan Hagedorn from Indiana presided over this excellent conference which well-represented her

2004-2005 Presidential Theme: "The Alliance and the ADA - Partners in Dentistry". Our 2006 Leadership Conference will be held April 19-22 at the Red Lion Hotel in Seattle, Washington. I would encourage anyone to attend. Conference is both educational and entertaining. Deadline for grant application for 1st time attendees is January 2, 2006.

Several Members of the Virginia Alliance attended the MCV Dental Student Clinic Day on April 6. For the sixth year the Alliance sponsored a free raffle to married dental students for a \$60 Walmart Gift Card. The Clinic Day is an opportunity for the Alliance to "spread the news" that the Alliance is a national organization of men and women who support the values and goals of organized dentistry. Through Clinic Day we offer dental student spouses a free one-year membership in the Alliance in order for them to learn more about our initiatives in oral health education, legislation and advocacy, and membership and leadership development.

It's not too early to start planning for our VDA/AVDA Annual Meeting at the Richmond Marriott. Please mark September 14-18 on your calendars and plan to attend. The state committee is planning many fine things for our weekend. Our annual Alliance luncheon and membership meeting will be held on Saturday, September 17th.

Please contact our Vice-President for Membership, Mrs. Carol Rasmussen (3208 Heathcote Lane, Keswick, VA 22947 Phone 434-984-5995) for more information and to join the Alliance.

See you in September!

Virginia Society of Oral and Maxillofacial Surgeons

Dr. Kimberly Swanson, President

Greetings from the Virginia Society of Oral & Maxillofacial Surgeons! I would like to update you on what the VSOMS has been doing. Every other year, we offer an Advanced Cardiac Life Support class, followed by Risk Management. The alternating years, we sponsor an Implant Seminar. This was the year for the Implant

Seminar.

On February 4, 2005, the VSOMS and Nobel Biocare presented Dr. Jean-Francois Bedard. Dr. Bedard is a Prosthodontist and practices in Englewood, Colorado. He lectures nationally and internationally on aesthetic, reconstructive, and implant dentistry. He gave a wonderful all day presentation on implant placement in the esthetic zone. He talked about treatment planning from both the surgical and restorative aspects. His approach benefited both the surgeon and the restorative dentist. He was an enthusiastic and enjoyable speaker. On behalf of the VSOMS, I would like to thank Nobel Biocare for finding him for us. If any of you are interested in hearing him, contact the Continuing Education Department at Nobel Biocare.

The VSOMS continues to have a presence at the Virginia Board of Dentistry meetings. We are monitoring legislative issues pertaining to our practice. Of interest, the Board has deemed that double degreed Oral Surgeons can only use the M.D. if they actually have a Virginia Medical License. If they have the M.D. degree but no medical license, they cannot use the M.D. as a credential.

We are busy planning our 2005 Annual Meeting. It will be June 24-26 at the Cavalier Hotel in Virginia Beach. Our speaker will be Mr. W. Scott Johnson, Esquire. Mr. Johnson is a defense attorney and has given presentations at our national AAOMS Meetings. He is a staunch advocate for the Virginia Dental Association and the VSOMS. He routinely appears before the Virginia General Assembly to lobby on issues affecting health care providers, hospitals, and professional organization. In 2001, Mr. Johnson's assistance proved indispensable to the passage of Senate Bill 806 that updated the Definition of Dentistry in Virginia. Mr. Johnson will be addressing Medical Malpractice Case Law and will give a 2005 Legislative Update and Closed Claim Review. We invite you all to attend. See you at the beach!

Public Health News

As part of "Give Kids a Smile" Day, staff in the Division of Dental Health (DDH) joined the Virginia Dental Association, Chesterfield County Schools and Virginia Commonwealth University (VCU) School of Dentistry to provide dental screenings to 200 students and schedule appointments for more than 160 children with dentists in Chesterfield County. DDH staff also provided education on oral hygiene and nutrition.

On February 11, 2005 the Division of Dental Health provided training for 85 Virginia Department of Health dental staff via teleconference. Dr. Michael Healy and Dr. Vincent Sawicki from VCU School of Dentistry lectured on "Cariology," the science of dental decay. Theories about the reason for development and rates of dental decay were addressed as well as patient risk factors for high decay rates. An index for scoring a patient's individual risks, clinical testing techniques and the most current treatment protocols were also discussed.

With the success of previous educational brochures, the Division of Dental Health has been working on several new topics areas this year. DDH brochures have been popular with school nurses and at community events such as the MOM's projects. The new brochures that will be available soon will include mouthguards, oral piercing and tips on living in areas with high natural fluoride. In developing the fluoride brochure, DDH has been working with the Office of Drinking Water to provide information for parents on preventing fluorosis for individuals residing in high natural fluoride areas (above 2mg/L.) It also encourages individuals on private wells or small-unregulated ground water well systems to determine the fluoride level of their water and to speak with their dentist or pediatrician if they reside in a high fluoride area. This brochure will be disseminated through elementary schools and day care centers in the Three Rivers Health and Western Tidewater Health Districts in early spring. To view this brochure or for more information visit www.vahealth.org/teeth "Community Water Fluoridation."

School Of Dentistry

Meredith Bryk

Contributing Editor

Clinical Simulation Renovation Update

As the School of Dentistry moves through its Clinical Simulation Renovation plan, a number of renovations must be completed to make room for the project's primary goals: a 20-station DentSim Lab, a 100-station Mannequin Lab, and the Delta Dental Conference Facility.

Phase One of the renovation plan, which comprises the required preliminary changes, has included refurbishing 14,500 square feet on the first floor of the Lyons and Wood Buildings.

- Since students will no longer have their own designated lab benches, they will need larger storage lockers. A room with the first 100 larger lockers has been completed on the first floor of Lyons.

- New restroom facilities for students, complete with showers, have been completed adjacent to the new locker room.

- The Henry Schein Dental Store has been relocated to the basement level of the Lyons Building. Additional lockers will be installed in the store's former location.

- The academic offices of the Department of Orthodontics have been relocated to the north end of Lyons First Floor.

- The construction of two state-of-the-art laboratories, including a 40-station Clinical Support Laboratory for students and a new Service Laboratory for dental laboratory technicians, will begin in Spring 2005.

Phase Two of the renovation plan, which includes the simulation labs and the conference facility, is scheduled to begin in Summer 2005.



Newly renovated locker room and lecture hall.

Dr. Monroe Harris is Appointed to Board of Medical Assistance Services

The Virginia Dental Association is pleased to announce that Governor Warner has appointed Dr. Monroe E. Harris, Jr., DMD, to the Board of Medical Assistance Services for the four-year term of March 8, 2005 through March 7, 2009. Dr. Harris, an oral and maxillofacial surgeon who currently practices with Doctors Niamtu, Alexander, Keeney, Metzger, Dymon and Associates in Richmond, is currently the President of the Old Domin-

ion Dental Society and President Elect of the National Society of Oral and Maxillofacial Surgeons.

The Board and the Department of Medical Assistance Services (DMAS) administer Virginia's Medicaid and Family Access to Medical Insurance Security (FAMIS) health programs. As a member of the Board, Dr. Harris will be involved in key policy issues affecting the 644,000 persons enrolled in Medicaid and 71,000 children enrolled in FAMIS. Dr. Harris becomes the first dentist in several years to be on the Medicaid Board. His presence on the Board will be particularly beneficial as the Board and DMAS implement the new "Smiles for Children" dental program for Medicaid and FAMIS children. The VDA looks forward to working with Dr. Harris, the Board and DMAS regarding Medicaid and FAMIS dental health issues.

Continued From Page 15

B completes his initial treatment plan and lists nine modalities. The patient is suspicious and returns to dentist A or another practitioner for corroboration. Dentist A tells the patient that three of the recommendations are necessary, but the remaining six items are not. The patient then makes an "over diagnosis" complaint. In reality, dentist B commingled immediate and future treatment by failing to distinguish between the two categories. A dental form which includes columns for "IMM" [Immediate needs] and "W&W" [Wait and Watch for future needs] simultaneously cues the dentist to differentiate between the treatment types and overcomes a potential over diagnosis claim.

As you can see, all charts are not created equally. A quick review of the forms you presently use would be time well spent.

To order the Initial Oral Examination sheet, or for additional information, call 602-266-6060.

Jeff Tonner is an attorney in Phoenix, AZ. His practice encompasses defending dentists in malpractice or board actions; writing educational books, manuals and articles; and , presenting dental-legal risk management seminars. Mr. Tonner recently has published Best Dental Charts. They contain suggested entries, like those listed in this article. Samples can be viewed on his website, Best-DentalCharts.com, or by contacting him at dentlaw@jefftonner.com or (602) 266-6060.

Continued From Page 7

be able to formally assist you, because ERISA gives the federal government exclusive regulatory jurisdiction over self-insured plans. Since there is no insurance contract between the employer and administrator in a self-insured plan, the Bureau of Insurance cannot intervene because it only regulates insurance companies. The Bureau of Insurance does not regulate employers. You can seek assistance from your employer by contacting the Plan Administrator or Benefit Administrator. In addition, you can contact the DOL for assistance: www.dol.gov/ebsa or call toll-free 866-275-7922.

Self-insured plans also provide a way for individuals covered under the plan to file appeals through the internal appeal procedure available with that particular plan.

Along with exemption from regulatory jurisdiction by the Bureau of Insurance, self-insured plans are exempt from Virginia insurance laws, including those that pertain to mandated benefits, appeals, and consumer rights.

Continued From Page 12

For more information, please contact Maria Glezos, CLTC, Long Term Care Specialist, B&B Insurance Associates, Inc. at 301.598.2341 or maria.glezos@verizon.net.

Pauline, President of Pauline Grabowski and Associates provides motivation and coaching to dental practices. Pauline's career in dentistry started twenty-two years ago as a certified dental auxiliary and practice administrator. Pauline is a seasoned practice management consultant that provides a wealth of knowledge to the development of the entire dental team. Pauline Grabowski and Associates conducts in-office analysis of the business and implements systems one-on-one with each team member. Specializing in new office set-up, designs, marketing, scheduling for productivity, treatment planning/case acceptance, Pauline has built her reputation on practice solutions for hundreds of practices. Pauline is currently a member of The Academy of Managed Consultants and a sponsor for AGD Fellowship/Mastership credit, which allows for CEU's.

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Classified Ads

Classified advertising rates are \$40 for up to 30 words. Additional words .25 each. The classified advertisement will be in the **VDA Journal** and on the **VDA Website - www.vadental.org**. It will remain in the Journal for one issue and on the website for a quarter (3 months) unless renewed. All advertisements must be prepaid and cannot be accepted by phone. Faxed advertisements must include credit card information. Checks should be payable to the Virginia Dental Association. The closing dates for all copy will be the 1st of January, April, July, October. After the deadline closes, the Journal cannot cancel previously ordered ads. This deadline is firm. As a membership service, ads are restricted to VDA and ADA members unless employment or continuing education related. Advertising copy must be typewritten and sent to: Journal & Website Classified Department, Virginia Dental Association, 7525 Staples Mill Rd., Richmond, VA 23228 or fax (804) 261-1660.

The Virginia Dental Association reserves the right to edit copy or reject any classified ad and does not assume liability for the contents of classified advertising.

PRACTICES FOR SALE

Danville Area #7018

Gross \$310,365; 3.5 days
4 operatories; 2150sq. ft. office space
Assistant (ft), assistant (pt), office manager;
Beautiful office, large lot, computer system,
Excellent potential.

Hampton #7007

Gross \$406,640; 5 days
3 operatories; 1600 sq. ft. office space
Assistant, bookkeeper (pt), office manager
3 additional plumbed out but unequipped operatories

Roanoke #8217

Gross \$439,961; 4 days
4 operatories; 1455 sq. ft. office space
Assistant, hygienist, receptionist

Roanoke Area #7076

Gross \$700,543; 4 days
4 operatories; 2,000 sq. ft. office space
2 assistants, hygienist, 2 receptionists
Additional plumbed but unequipped operatory

Virginia Beach #8208

Gross \$380,797; 4 days
1,038 sq. ft. office space
Assistant, bookkeeper, receptionist

West of Richmond #8168

Gross \$222,652; 3 days
4 operatories, 1,875 sq. ft. office space
2 assistants, receptionist

Williamsburg #7008

Gross \$233,387; 4.5 days
3 operatories, 1200 sq. ft. office space
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Condo for sale with practice in professional park
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For more information on any practice listed above, call Professional Practice Consultants, Ltd., Dr. Jim Howard at 910-523-1430. We have 100% financing available for qualified buyers.

RADIOGRAPHIC SERVICES

Several community practitioners have expressed a need for assistance with radiographic services, either because of a lack of equipment or difficulties in obtaining imaging studies on patients with physical limitations. The VCU School of Dentistry is accepting referral orders for panoramic and occlusal radiographs to assist practitioners with these needs. Please call the Radiology Clinic at (804) 828-0714 to schedule and appointment.

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Address: 4000 W. Mercury Blvd., Hampton, VA 23666

VIRGINIA – CENTRAL, VA

Affordable purchase opportunity: small orthodontic practice with satellite offices, all in fast-growing counties. Good opportunity for new or established practitioner. Available to assist in transition. Email replies to: ortho_inquiries@earthlink.net.

DENTAL SPACE FOR LEASE IN MAY 2005

1,824 sq.ft. of dental space available at 9568 Kings Charter Drive off Atlee Elmont I-95 exit in growing Atlee area of Hanover County. Includes 4 exam rooms, x-ray and sterilization room, office, recep/wait room, kitchen, private bath. Contact Ashley Waller at 804-550-9219.

PRACTICE FOR SALE

Shenandoah Valley. Solo practice collects nearly \$300,000. No hygienist. Tremendous growth potential. Contact: Jerome Connolly, Paragon Dental Practice Transitions, 1-877-227-9862. See ad: www.paragon.us.com

PRACTICES LOOKING FOR DENTISTS:

Dentist Placement Advantage is a nationwide dentist placement service operated by accomplished dentists! We have experienced dentists ready for locum tenens (temporary) assignments when you are on vacation or away from your practice, as well as fantastic candidates for associate or partnership positions.

DENTISTS LOOKING FOR OPPORTUNITIES:

Whether you are looking to establish an associate career in a successful growing practice, find the right practice for a partnership or purchase opportunity, or work as a temporary dentist, Dentist Placement Advantage has great opportunities for you!

Contact: Steven E. Peterson, DDS

Phone: (800) 710-9720

Fax: (520) 844-6224

Email: drsteve@dentalpower.com

Web: www.DentalPower.com

FOR RENT: Far West End

1440 sq. ft. adjacent to pediatric dental office. "Shell space" ready to be constructed to your specific floor plans. Call Jeff Blair 741-1400.

FOR SALE: Far West End

Four ceiling mounted pelton crane lights with mounting hardware. Good condition \$450.00 each. Call Jeff Blair 741-6315 evenings.

ASSOCIATE

Chester, VA practice seeking an associate that is interested in working in a high volume environment. Days are flexible. Must be comfortable performing extractions. Good chair side is required. Pay will depend on candidate. Contact Brian Whitley at 1-800-313-3863 ext. 2290 or email bwhitley@affordablecare.com

EQUIPMENT FOR SALE

Chayes Virginia Vision Chair – perfect upholstery
Great Upholstery - colors – Mauve and Cream
Adec Minitroll Unit – Three (3) handpieces
Adec Cuspidor w/assistant HVE and saliva ejector
Pelton Crane LFII Light
6 - For Sale
1 - \$2,500.00 each
2 - \$2,250.00 each
3 or more - \$2,000 each
Contact Dr. Randall I. Furman at 757-468-4684.

WEST VIRGINIA - FFS

6 operatory - well established part-time dental practice - Gross \$360,000 - 100% sale or partnership available - excellent growth potential - 2,200 patient records. Call The Snyder Group 800-988-5674 or visit www.snydergroup.net.

ASSOCIATE DENTIST WANTED

Immediate opening for a full time dentist in Gloucester, VA. Be your own boss/in your own office. Immediate buy-in agreement if desired. Exceptional opportunity. Please contact Dr. Bob Dreelin at 757-850-1421.

GENERAL DENTIST- PART-TIME

The Virginia Home, a nursing home for persons with physical disabilities, seeks to contract for onsite dental services for our residents. We need monthly consultations to include examinations and treatment. Current Virginia dental license required and interest in caring for persons with disabilities preferred. Position open until filled. Email CV to William.Coleman@thevirginiahome.org or call 804-359-4093, ext. 241.

NEW DENTAL OFFICE EQUIPMENT FOR SALE

The following items are one year old:
Compressor and vacuum system,
2-ADEC chairs,
Steri-center,
Trophy x-ray,
Scan-x digital x-ray unit,
2 treatment centers,
2 older ADEC chairs
Please call for additional items info.
Dr. Sandra Doonquah @ 908-338-1812

GENERAL DENTIST WANTED

Immediate position for a general dentist in a digital dental office. Part-time, full-time, or buy-out possible in Danville, VA. Owner has relocated. Contact Dr. Sandra Doonquah at 908-338-1812 or email at sbd5@nyu.edu.

GENERAL DENTIST

Group practice of three dentists in Churchland area of Portsmouth is looking for a general dentist to take over for one who is retiring. Three-five days a week. Buy-in is available or can work as an associate. Practice has a large, established patient base, new patients, and employs four full-time hygienists. Please contact Dr. Jim Kail or Dr. Walter Cox at (757) 484-1675, or write us at 5717 Churchland Blvd., Portsmouth, VA 23703.

ASSOCIATE POSITION

Newport News/Yorktown area, progressive practice offering wide range of services in top notch facility, great opportunity to develop skills. Digital radiography, cosmetic imaging, amazing staff. Senior dentist wants more time off for mission trips. For more info., see www.dentistcare4u.com. Send CV's to wgriffin14@cox.net.

PT Specialist Associate –

Family & Cosmetic Dentistry practice in Leesburg, VA is seeking a professional associate (part-time capacity) in the specialty of Periodontics. Interested candidates, experienced in all phases of periodontal practice (including dental implants), should FAX a resume to: 703-858-9542. Compensation/benefits negotiable based on experience. For details, please call 703-858-9200.

PRACTICE FOR SALE

Fredericksburg area. Modern 3 ops, plumbed for more. Grossing \$350k on 3.5 day week. No evenings, no weekends. Professional building. Growing area. High net income. No capitation. Call Polcari Associates, Ltd. (800) 544-1297.

DENTIST – VIRGINIA BEACH

Immediate position for general dentist. Current associate leaving due to health- Very busy comprehensive dental practice with focus on helping people. Rock solid staff and business systems. No turnover. Excellent pay (salary or production based-you choose). All lab expenses paid. Health and vacation. This opportunity does not come around often. FAX CV to 757-363-2302 for confidential interview.

THE DEPARTMENT OF MEDICAL ASSISTANCE SERVICES (DMAS) ANNOUNCES PLANS TO IMPLEMENT SMILES FOR CHILDREN (A NEW DENTAL PROGRAM) ON JULY 1, 2005

Great news! The Virginia General Assembly approved a 30% increase to Medicaid dental rates. Currently, only 16% of Virginia-licensed dentists participate in the Medicaid and FAMIS programs, and only 25% of enrolled children receive dental services. If you now participate as a Medicaid/FAMIS provider, we request your continued participation. If you are not a Medicaid/FAMIS provider, we want your participation!

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