

General Meetings and CE 2005-2006

Program Chairperson

Dr. Scott Galkin

November 15, 2005

Dr. Keith Rossein

“Narrow-Bodied Long-Term & Transitional Implants: Great Implant Practice Builders”

January 17, 2006

NJDA Officers Night/Induction of Life Members

February 21, 2006

Dr. John Molinari

“Update on Vaccine Recommendations”

March 21, 2006

Dr. Gerald Greitzer

“Adhesive Dentistry”

April 18, 2006

Dr. Michael Glick

“Emerging Infectious Diseases: An Update for Dental Healthcare Providers”

May 16, 2006

STAFF NIGHT

The Dental Newsletter



www.MCDSofNJ.org

A Publication of the Middlesex County Dental Society

Acting Presidents' Messages ... Stephen Lawson



Thousands of victims left homeless by Hurricane Katrina have relocated to many states across the country. 850 dentists practiced in Katrina's "primary impact zone" along the Gulf Coast. Many of these dentists will not be able to re-open their practices for months. Following tragic world events and natural disasters, we are reminded of how fortunate we are to have wonderful professional careers, support from friends and colleagues, and love from our families.

Through the Perth Amboy Gulf Coast Families Relief Fund Project, up to 100 families will be provided with temporary housing in an effort to help rebuild their lives. Middlesex County Dental Society is asking for volunteers to provide emergency dental care for victims who have relocated to New Jersey. The American Red Cross has already contacted our society regarding 2 people with immediate dental needs.

I am proud to announce that at the September 20, 2005 general meeting, 15 Middlesex County Dental Society dentists agreed to provide pro bono emergency care for families who have relocated to Middlesex County. I urge you to participate with our relief efforts. Please contact our executive secretary, Marlene Glickman.

Continued on page 2

GENERAL MEETING – Tuesday, November 15, 2004

THE PINES Route 27 • Edison, NJ

Registration	6:00
Business Meeting	6:30
Dinner & Speaker	7:00

“Narrow-Bodied Long-Term & Transitional Implants: Great Implant Practice Builders”

Featured Speaker: Dr. Keith Rossein



This lecture will teach participants to use three different narrow-bodied implant systems that can be utilized for on-going and long-term implant therapy and/or as support for transitional prostheses. Patients can resume their daily activities and lifestyles almost immediately. Several techniques for emergency intraoral repairs will also be explained.

All three systems make maximum use of existing bone, even when substantial resorption has occurred. The clinician can reproduce within the provisional stage any possible final scenario. A single-tooth, a multi-unit or a full-mouth temporary restoration can be fabricated chairside or by the dental lab and may be fixed and either cemented or screw-retained; effective results can be obtained in the maxilla or the mandible; a denture may be retrofitted over individual implants or retained by an implant-supported splint.

These implant systems have solved a major problem for implantologists and should open up the opportunity for implant therapy to many more patients. It's been estimated that 25-30% of all patients who could benefit from implant treatment never have the treatment because of ridges that are too narrow, or limited vertical and/or interproximal space and/or the inability to pay for the treatment. What about the very elderly or those patients with systemic problems and/or those undergoing radiation or chemotherapy? Now there is a cost-reasonable alternative to the traditional implant protocols.

This seminar is highlighted by a discussion on case presentation tips, including communication skills, the use of visual aids, establishing implant fees, and how to get started.

MCDS Board of Trustees Report

- October 11, 2005 -

Attendance: Ashmen, Brunsdn, Courey, Fahsbender, Galkin, Glickman, Ibrahim, Kahn, Katz, Lawson, Leizer, Prabhu, Rosen, Rosencweig, Silverstein, Simos, Villa, Vitale, Wasserman, Weiner, Ziembc

Acceptance of Minutes-vote unanimous.

Acting President's Report-Stephen Lawson

Happy Birthday to our Executive Secretary, Marlene Glickman.

A letter was sent to Arthur Meisel stating that I have accepted the position of Acting-President of MCDS.

The Board welcomed Dr. Robert Rozencawig to our meeting.

I will be attending the Semi-Annual Session of the House of Delegates on November 9, 2005.

A letter of recommendation for Richard Kahn for Treasurer of NJDA was sent to Arthur Meisel.

18 members of MCDS signed up for volunteer emergency care for victims of Hurricane Katrina. Anna Battle from the American Red Cross is coordinating the relief effort and she has already contacted MCDS regarding 2 patients.

Congratulations to Dr. Robert Ashman, who accepted the position of Program Chairperson for 2005-2006.

A committee consisting of Drs. Lawson, Brunsdn, Ziemba, Prabhu, Courey and Silverstein will discuss how to possibly use some of the available funds in the money market account for our membership.

Treasurer's Report-James Courey

See full report on page 3.

Editor's Report-Mitch Weiner, Bob Silverstein, Constantine Simos

The deadline once again for submissions for the upcoming newsletter will be the evening of the Pines Manor dinner. The upcoming November issue will have very little open space for submissions as the ADA Report, NJDA Trustees Report and Dental Benefits Report will be included in the issue and we have the full day and mentor courses to promote. I have made an exception to my usual rule of no more than one insert per newsletter. We have been giving up lots of space in the newsletter to ads from our full day course sponsors. While this is a necessity, I feel that we should move towards making the ads smaller than full or half page so that we can generate more non-dues income from ad revenue. I have seen a surge in demand for advertising in our newsletter and feel that it could be generating more ad revenue than it does. It is my goal to continue to keep the newsletter in an 8 page format with 1-2 insertions depending on CE course promotion demand. In addition, follow up calls to any new life members who have not submitted their bios should be done to remind them of the Thanksgiving deadline.

ADA Delegate's Report-Joel Leizer

See full report on page 4

NJDA Trustee's Report-Richard Kahn

See full report under NJDA Noteworthy News on page 6

Give Kids a Smile-Cavan Brunsdn

The National Dental Access Program for Children will be held in N.J. at over 50 dental health sites, including private practices on Friday, February 3, 2006. Last year, 2,500 children received an exam, cleaning, sealants, and emergency care as needed. Please contact Cavan Brunsdn 732-679-2323 or at Brunsdn@kidzdent.com for more information on how you can participate.

NJDA Council Reports:

Annual Session-Araceli Ziemba

The Annual Convention was an overall success and Dr. Lee's (forensic dentist) lecture was a huge hit. Feedback from the 2005 Annual Convention was overwhelmingly positive. Exhibitors were pleased with attendance & sales, and were

On the legislative front, Mr. James Schulz is the New Jersey Dental Political Action Committee (NJDPAC) Executive Director. Mr. Schulz spoke at our last general meeting. Contributions to NJPAC allow organized dentistry and its lobbyists to have a voice in Trenton and develop relationships with elected officials. All NJDA officers, trustees, council chairs and component presidents are Diamond Club members. Only about 36% of New Jersey dentists are members of NJPAC. Increased membership will allow us to have better access into Trenton and financially support elected officials who care for our profession. Mr. Schulz explained to us that this election year is critical to dentistry's future. We need to understand the issues and contact our state legislators. Visit our website (njda.org) to find your state legislators and learn more about governmental affairs. Please consider joining NJPAC.

Our next full day CE program is on Wednesday, November 9 at the Pines Manor. With his informative and interactive presentations on restorative techniques and practice management topics, Robert R. Cowie, DDS, FAGD is in demand as a speaker at dental meetings and study groups throughout the country. Dr. Cowie engages his audience and encourages their participation through the use of wireless interactive technology. Dr. Cowie moves his lectures away from the level of "look how good I am" to the more effective level of "let's see how good I can make each of you". Audiences can expect to learn, understand, and be motivated to provide better care for their patients. Also, please remember to register for the Annual OSHA Certification Seminar on November 29 and Dental Technology Solution – Simplifying Technology on December 14. With your support, Middlesex County Dental Society can continue to bring you nationally recognized speakers.

I look forward to seeing you at the next meeting!



The **Dental Newsletter**

A Publication of the Middlesex County Dental Society

Published at the office of Dr. Robert Silverstein

www.MCDSofNJ.org login: mcds

password: sy

Continued on page 3

Detailed Treasurer's Report
September 30, 2005
James Courcy, DDS

	(9/1/05-9/30/05)	
Checking	27,585.89	25,233.09
Money Market	58,340.92	58,400.38
TOTAL	85,926.81	83,633.47

P&L STATEMENT CHECKING ACCOUNT
(9/1/05-9/30/05)
INCOME

Corp Spon-news1	200.00
Interest Earned	8.32
TOTAL INCOME	208.32

EXPENSES

Cont. Ed.	198.00
Executive Secretary	380.00
Office Supplies	1,858.12
Secretarial	125.00
TOTAL EXPENSES	2,561.12
OVERALL TOTAL	(2,352.80)

P&L MONEY MARKET ACCOUNT
(9/1/05-9/30/05)
INCOME

Interest	59.46
TOTAL INCOME	59.46

EXPENSES

TOTAL EXPENSES	0.00
OVERALL TOTAL	59.46

Dental Specialist seeks office space in previously existing office (with or without equipment) or in existing office in either East Brunswick or New Brunswick.

Please contact Dr. Blume at
732-995-2496 or
OBTUR8RMOM@aol.com.

Attention MCDS Members

Anyone who is interested in providing pro bono emergency dental care for victims of Hurricane Katrina who have been resettled in Middlesex County, please call
Marlene at
732-238-1255

For more depth on
NJDA issues,
read the

Capsule

MCDS Board of Trustees Report

Continued from page 2

pleased with the dentist's personal and professional interaction. The NJ Society of Periodontists held their spring meeting in conjunction with the 2005 NJ Annual Convention. Despite all of the planning & advertising efforts, attendance was still low. Therefore, The NJSP will take a pass in 2006 and may revisit in 2007. A sampling of the 2006 Speaker Roster consists of:

- Dr. John Kanca: Adhesive Dentistry for the New Millennium
- Dentsply Tulsa: Endo/Hands On
- Dr. David Goteiner: Gingival Manifestations of Disease
- Team Building Lectures
- CPR & OSHA Classes

The Annual Convention will continue to be held at The Taj Mahal because it still remains convention friendly and cost effective.

Dental Benefits-Mark Vitale

See full report on page 9

Dental Education-Bob Ashmen

The Smile-on-line program will be coming back online, under the management of the Council on Dental Education. Anyone NJDA members interested in fielding questions can contact Trish DeCotiis at NJDA. Creation of a survey evaluating the interests and preferences of NJDA members in regard to continuing education programs is being finalized for distribution to its members. This is to aid in addressing the preferences of NJDA members in regard to courses sponsored by NJDA. Four scholarships of \$500 each were awarded to 4 students in dental assisting programs throughout the state.

Membership-Scott Galkin

The New Jersey Dental Association has been mailing a satisfaction survey to all of its members, asking what they like and do not like about the association. 2006 invoices will be sent out soon. Payment election forms were sent out in late September; this allows members to choose if they want to pay by installments on credit card or by check in full. NJDA has been continuing their programs at New Jersey Dental School. They have set programs and events for each class and give gifts to the students from the NJDA as well. NJDA has also visited all of the GPRs and specialty programs in the state to encourage membership and promote organized dentistry.

Peer Review-John Fahsbender, Mark Vitale

One case was reviewed by the committee and resolved.

Committee Reports:

Budget and Finance-Ira Rosen, Nancy Villa

The 2006 budget was presented to the Board and approved.

Mentor-Ethan Glickman

Our next OSHA Certification Seminar will be presented on November 29, 2005, Tuesday evening at St. Peter's Medical Center, New Brunswick, NJ.

This program satisfies the OSHA standard on Occupational Exposure to Blood Borne Pathogens, which is required annually for dentists and staff. Each office person trained receives certification that they have been properly instructed for this OSHA regulation on Infection Control. The fee is the same as last year, \$15/pp. Please note that this OSHA program offered elsewhere normally asks for a tuition fee of at least \$85. This is another great member benefit for belonging to MCDS!

Dental Technology Solutions - Simplifying Technology seminar; will be presented on Wednesday; December 14, 2005 from 9AM to 4PM; 6 CEU credits will be awarded. See the registration and information insert in this November 2005 MCDS newsletter.

Old Business

The following motion was made by Dr. Weiner and properly seconded: The Board of Trustees should, on a yearly basis, hire a competent person to perform the task of Event Coordinator to assist the Program Chair with coordinating the entertainment, menu, table arrangements and door prize purchases/solicitation. The position should be renewed on a yearly basis based on previous performance. The hourly rate should not exceed that of the Executive Secretary and fit within the prescribed proposed and passed budget. The motion passed.

continued on page 9

2005 ADA Annual Session Report - Dr. Joel Leizer

The new ADA President-Elect is Kathy Roth. She defeated Bernard McDermott from our fourth district 236-224.

Resolutions

Priority Items:

39- Consultation Evaluation of International Dental Schools- ADA supports Council on Dental Accreditation (CODA) initiative to offer consultation services to international dental schools. The ADA and CODA should establish a joint advisory committee. This is in an effort to determine which foreign schools meet the standards for U.S. accreditation. This is in response to a push by some states (California, Minnesota) who want to have their legislatures accredit foreign schools without dentistry's input.

Budget, Business and Administrative Matters:

26RC- Establishes the target for reserves of the association to be 40% of the operating budget. We are now at approximately 42%. The resolution calls for the association to take the amount of money in excess of the target amount and use it in computing the needs of the association in the following fiscal year.

63RC- ADA Board of Trustees (BOT) be urged to develop a plan for long term needs of our dental family as a result of disasters.

Report to the 2006 House of Delegates (HOD).

87RC- ADA Foundation Bd. of Directors urged to temporarily waive the grant limit of the Disaster Response Fund above the current \$2500 limit if excess money is available. To be used to help the victims of the 2005 hurricanes.

95- BOT to review current policy concerning financial assistance to constituent societies on issues of national significance.

Dental Workforce:

85RCS-1- A task force of 19 members (one from each district and two trustees appointed by the ADA President. It must contain members of the Council on Access, Prevention and Inter-professional Relations and the Council on Dental Practice). They are to study possible new types of allied dental personnel and realignment of roles for existing personnel. They will study the adequacy of the current workforce to serve population groups with unmet oral care needs, the rationale and feasibility of additional duties for allied dental personnel, the impact on access to care in states where expanded duties or independent practice of dental auxiliaries have been granted, the disparity between need and demand for oral health care and the real and perceived causes of any unmet needs, development of strategies to increase oral health literacy and utilization.

48- ADA to work with dental educators to develop a model for curriculum changes that would aid in the development of dentists trained with a focus on community-based dentistry. The model should be field tested by one or more pilot projects and report to the 2006 HOD.

59RC- Appropriate ADA agencies in conjunction with recognized dental specialties and general dentistry review supervision of dental hygienists in all work settings including Public Health settings.

Communication and Membership Services:

1- Gives applicants for membership certain ADA services for a period not to exceed six months while their membership is being processed. These include JADA, ADA News, access to member-only website and member pricing from ADA catalog. Done on a one time only basis.

2- Active members selected after July 1 of a year pay 50% dues. Those elected after October 1 pay no dues until the next year.

70- Waive the fee for mail-in or online continuing education services for those members of the Federal Dental Services serving in deployed areas where there is no access to continuing education programs.

78RC- Online leadership training modules for member dentists.

84- Explore the creation of new membership categories for dental assistants and hygienists. Report to 2006 HOD.

Dental Benefits, Practice, Science and Health:

37- Standardization of numbering systems for diamond burs. International Organization Standardization number coding system should be followed.

53- Definition of a Dental Home- The ongoing relationship between the primary care dental provider and the patient. It includes comprehensive oral health care, beginning no later than age one, pursuant to ADA policy.

75B- National Community Water Fluoridation- Plan to develop strategies, educational programs and other actions to make this a reality. Report to 2006 HOD.

41RCS-1- Oral Health Assessment for Children- Steps necessary to educate policy makers and the public to the fact that oral health is an integral part of overall health.

4S-1- Audits of Dental Offices by Third Party Payers- Know what boundaries the third party has in their audit. Review all contracts with third parties before signing up. Contact attorney to find out about potential legal liability before signing a contract.

5- Rescind policy regarding posterior composite resins. This was the only procedure that we had specific policy. The ADA feels that anything that is covered by CDT is an accepted procedure and we do not need a specific policy for any single item.

52B- Develop a new "brand name" for Direct Reimbursement.

6- Licensing of prosthetic dental labs is not warranted. We are responsible to our patients, not the labs.

83RC- Dental laboratories should inform the dentist if any part of their work is being sent to a foreign lab for fabrication. The ADA urges the FDA to require a lab to do this.

Dental Education and Related Matters:

49 ADA to continue to monitor the activities of the clinical testing agencies and report annually to the HOD.

18- Definition of Titration in Anesthesia- the administration of small, incremental doses of a drug until the desired clinical effect is

continued on page 5

obtained.

20RC- Elimination of Human Subjects in Board Examinations- The ADA supports the elimination with the exception of curriculum integrated format within the dental schools.

94- Pathways for Licensure of Foreign Dental Graduates. This was defeated. It was felt that foreign graduates who do not come from an accredited school (when and if these schools are accredited) should follow the current pathway of attending U.S. dental school before being eligible for licensure.

73RC- Increased government funding for Postgraduate Training Programs.

Legal and Legislative:

55- ADA should implement the 2006 advocacy plan to prevent state bans on dental amalgam.

21- Best Dentist List- any list of "best dentist" should incorporate a full disclosure of the selection criteria, including, but not limited to, any direct or indirect financial arrangements.

57RC- Continuation of Alaska Native Oral Care Access Task Force.

81- Dental Referral Services- Pursue all actions necessary to develop and influence legislation designed to increase responsibility and liability of dental referral services.

New Business:

93- ADA opposes all pilot programs that are in violation of ADA policy that prohibits non-dentists from making diagnosis, developing treatment plans or performing irreversible procedures.

96-1- ADA appoint a committee to define, develop and evaluate a training and certification process including appropriate guidelines for Community-based Oral Health Aides. This should be done in conjunction with ADA agencies and other dental, community and health organizations.

SILENCE OF THE LAMBS by Dr. Joel Leizer and Dr. Harmon R. Katz

By now it's not a secret that a good dental education, investment in the latest technology, and being a conscientious competent and caring practitioner is not an assurance of a happy productive professional career. The tentacles of government laws, regulations and third and fourth party intervention are affecting us on a daily basis. Your dental association, both NJDA and ADA, are your advocates representing you every minute of every day. Lobbyists in Trenton and Washington supported by volunteer dental leaders provide education and testimony on a wide range of issues such as access to care, reimbursements and regulations. Currently being discussed on a national level is the training and participation of paraprofessionals, many of whom have only a high school education, providing irreversible dental procedures in undeserved areas. Locally we are dealing with a huge Medicaid population that is not receiving adequate care due to unrealistically low compensation. Environmentally, dentists are being singled out due to amalgam waste.

Organized Dentistry has been an effective advocate for the Dental practitioner in the past but the issues are becoming more complex and adversaries more sophisticated. Contrasted against this is a participation of dentists in political action committees of less than one third. If we are effective at this level think of how effective we could become at 100%. All it takes is making a contribution of \$150 to NJDPAC and \$40 to ADPAC. We can't afford the luxury of being silent any longer; this small contribution will help to ensure future success.



October Featured Speaker Dr. Donald Lewis (center) with Acting President Dr. Stephen Lawson (left) and Program Chairperson Dr. Scott Galkin (right)



MCDS Acting President Dr. Stephen Lawson and Membership Chairperson Dr. Scott Galkin welcome our newest members

To date we have 4,559 paid members, 32 less than our 2004 year end number and 27 applications still being processed. This is the last year that the ADA \$30.00 building assessment will appear on your dues statement. Give Kids A Smile (GKAS) program will be held on Friday, February 3, 2006. Children's Dental Health Month will be at the Circus. We are renewing a two/three year contract with the Taj Mahal for our annual convention. The final profit/loss for the 2005 Annual Session was over \$50,000 pending receipt of a \$7,200.00 check. The annual Peer Review Training session is scheduled for November 2. All component and specialty committee members must attend training at least once every three years in order to continue membership on the committee, but any dentist interested in peer review is welcome to attend. Four CE credits will be awarded.

Governmental Affairs – Mr. Jim Schulz

The DEP's desire is to include an amalgam separator mandate into its NJPDES (wastewater treatment) regulations, which is sunseting. It is still to be determined if separators will be included. The NJDA has been lobbying this issue aggressively by reaching out to the DEP, the Governor's office and key staff to get removal of the separator mandate. However, there is a strong desire on DEP's part to have amalgam separators instituted in the regulation, which is more than 300 pages long.

BMP's will become effective a year after the regulation is published which would not occur for at least six months. Therefore, we are looking at a minimum of one and a half years to get the word out about BMP's and about two and a half years lag time if separators are required.

NJDA is hoping to advance two issues in Lamé Duck -- elimination of the cosmetic dentistry tax; and the use of safety needles for intraoral procedures in hospital settings. We expect some consumer-friendly insurance legislation to pass. Whether or not that will affect dentistry remains to be seen.

NJDPAC Sustaining Membership is growing, as is Diamond Club Membership. There are more than 600 new members Sustaining Members this year and more 1900 total.

This is largely due to the efforts of Drs. Chinoy, Mayher, Schwartz and Perle in acquiring new members. Middlesex Dental Society is working on a grass roots legislative pilot program wherein three to five dentists are assigned to establish a relationship with an assigned legislator. This is what Texas has done and they are clearly the most successful dental PAC

Assembly Democratic Majority Leader Joe Roberts, the presumptive Assembly Speaker, has indicated that he would like to address the NJDA Board at a future meeting.

STATE BOARD OF DENTISTRY REPORT – Dr. Robert A. Hersh

At the September 7th meeting the Board decided to enter into an agreement with ADEX, a clinical dental exam program which is an umbrella organization under which three of the four regional dental boards are now situated.

Three CE providers have applied to the board for approval of an enteral sedation course. These programs will be evaluated by the Board's Anesthesia Committee. Although the regulation of conscious enteral sedation has passed and has been published, the implementation of this regulation as it relates to the issuance of permits, will be deferred for nine months to allow for time to take courses. The implementation of other parts of the regulation which, among other matters, dictates safe practice protocols it is, however, in effect at present. The permit portion of the enteral sedation regulation will not go into effect until July 1, 2006.

For those who completed a residency program within the last three years, or who passes a general anesthesia or a PCS permit, no permit is necessary. A dentist who completed a residency program more than 3 years ago need only have 20 hours of CE (didactic only) provided the residency program included a minimum of 60 hours of training in general anesthesia or conscious sedation. In all other cases there is a 40 hour requirement which includes both didactic and clinical components and that must be taken in a university, hospital or clinical setting. This will not become effective until July 1, 2006. The other portions of this regulation are effective now. The most important portion is having things such as emergency backup lighting, suction, etc. so that one can deal with emergency situations. This information will be reported in Capsule.

The Board discussed the issue of whether the medical board or dental board has oversight over MD/DDS-DMD oral surgeons. The Board expressed the feeling that since these clinicians were effectively practicing dentistry, the dental board has jurisdiction over these clinicians.

The issue of the expungement of disciplinary records was discussed. The Board decided that since a mechanism currently exists by which criminal offenses can be expunged, there should be, as well, a mechanism by which minor disciplinary records can be expunged. This matter will be explored through the Attorney General's office.

A request for approval of a CE program where the course provider and the participants are not NJ licensees was made. While the statute does permit teachers to teach on live patients in New Jersey, there is no provision for dentists licensed in other states to participate in clinical courses on live patients in New Jersey.

A letter was received questioning whether or not a dentist working for an insurance company as a consultant reviewing

Income

CONT. EDUC.-INC	25,000
CORP SPON-c.ed.	25,000
CORP SPON-mentr	500
CORP SPON-mtngs	4,000
CORP SPON-news1	1,000
DUES	50,000
INTEREST	700
MENTOR COMM-INC	6,000
STAFF NIGHT-inc.....	10,000

Expenses

ACCOUNTANT FEES	-250
AUDIOVISUAL EQP.....	-500
BOARD MEMBER EXPENSES	-600
CHILDREN'S DENTAL	
HEALTH MONTH	-1,500
CONT. EDUC.-EXP	-25,000
LECTURER FEES.....	-25,000
DINNER MEETINGS	-18,000
LECTURE FEES	-5,000
DONATIONS.....	-2,000
EXEC COM DINNER.....	-2,000
EXECUTIVE SECRETARY	-6,000
INSURANCE.....	-500
MEMORIALS AND GIFTS	-300
MENTOR COMM-EXP	-1,000
LECTURE FEES	-500
NAME BADGES.....	-500
NEWSLETTER	-2,000
OFFICE SUPPLIES.....	-2,000
PLAQUES.....	-300
POSTAGE.....	-1000
SECRETARIAL.....	-500
STAFF NIGHT	-17000
TAXES.....	-50
TELEPHONE	-850

Total income:	122,200
Total expenses.....	-112,350
Difference:	9,850

claims, requires a NJ dental license. The Board has previously taken the position that all persons who make dental diagnostic decisions should be New Jersey licensed dentists. This is a re-surfacing of the NJDA backed dental consultant bill which was previously passed by the State Board, but allowed to die by the Attorney General.

A letter was received requesting the Board to consider offering a special license for dental students which would permit them to perform the duties of an RDH or RDA.

The ability for non dentists to take x-rays is under the auspices of the DEP and not the NJ Dental Board. Accordingly, the Board is not able to permit dental students to take x-rays as requested. The ability of a dental student to perform the duties of and RDH or an RDA (with the exception of x-rays) will be considered. However, it would require an amendment to the State Board regulations.

REPORT OF OFFICERS

President's Report – Dr. August Pellegrini

Due to the pressing need for action regarding the potential of amalgam separators being required by the DEP to supplement the efforts of Jim Schulz. NJDA hired an outside lobbying firm, Strategies Impact for a one year contract at \$1000 per month. They will also work for us on all other issues during this contract, except water fluoridation.

President-Elect's Report – Dr. Robert A. Shekitka

A meeting was attended with Commissioner Jacobs to discuss the regulation on fluoridation. One outcome of this is that he received a call from the New Jersey Diabetes Council wherein it would like a dentist to be on its council. This may be a big first step regarding have dental care “elevated” into the level of total patient care.

NEW BUSINESS

The recent events in Louisiana and Mississippi brought about the issue of what NJDA could do to aid in the hurricane relief (Katrina). It had been suggested that we use some of the monies in the Relief Fund. However, the rules dictate that the indenture of trust is only for the benefit of New Jersey dentists. It was decided to focus on an NJDA contribution and to bring it to the delegates. A recommendation of the Board will be sent to the House of Delegates in November urging an amendment to the indenture of trust. If the House agrees, the matter would be carried for a vote to the House in June to vote on. The other alternative is to use monies from Available Reserve. It was adopted that NJDA donate \$5000 immediately to the ADA relief fund to be used by dentists and families who were victims of hurricane Katrina. It was further discussed that if the House of Delegates approves changing the language of the indenture of trust that an additional \$20,000 be donated at that time. It was further urged that everyone present take the message back to their component and request that the component advise the Association what it plans to do in terms of the Disaster Relief.



Middlesex County Dental Society

Full Day CE Programs 7 CEUs Each



Dr. Robert Cowie
 New Patient Protocol – The
 Patient Interview and Evaluation
 Open to Doctors and Staff
 Sponsored by Excel-Berger Lab
 Wednesday, November 9, 2005
 8:30am-4:30pm



Dr. David Garber
 Esthetic Success —
 ‘By Design’
 Open to Doctors and Staff
 Sponsored by Kuwata Pan Dent
 Wednesday, April 19, 2006
 8:30am-4:30pm

Registration Form

 Doctor's Name (Last) (First)

 Address

 City State Zip

 Office Telephone Number Fax Number

Non-Dentist Staff Members Attending the Cowie Course:

 Name Name

 Name Name

 Name Name

 Name Name

Non-Dentist Staff Members Attending the Garber Course:

 Name Name

 Name Name

 Name Name

 Name Name

Registration Fees: (Please check appropriate boxes)

MCDS Members/Residents:

Individual CE Programs \$65 ea
 List program speaker(s): _____

NJDA Members (non-MCDS):

Individual CE Programs \$100 ea
 List program speaker(s): _____

NJDA Non-Members:

Individual CE Programs \$225 ea
 List program speaker(s): _____

Total number of Non-dentist staff members for
 the Cowie and Garber courses: _____
 \$45 pp

Total Enclosed: \$ _____

Checks Payable to MCDS (Payment must accompany registration)

Mail to: Middlesex County Dental Society
 P.O. Box 7026, East Brunswick, NJ 08816

All programs to take place at the Pines Manor in Edison, NJ

Registration for all courses starts at 8:00 a.m.

Continental Breakfast and Lunch Included

For further information call 732-238-1255

Council on Dental Benefits

The council met on September 14, 2005 and the following items were reviewed.

CRP Statistics was reviewed from January 1, 2005 through August 31, 2005. There were 92 complaints submitted to NJDA; 38 were resolved, 16 were for data purposes, 29 are pending, and 09 were not resolvable.

Dr. Iserson reported on the ADA Conference on Dental Benefits in Chicago. There was considerable discussion on Health Reimbursement Accounts and other types of flexible spending accounts. Health Savings Accounts or HSA's are gaining popularity. The theory behind the HSA trend is that consumers will utilize health care more efficiently through the use of high deductible health plans in conjunction with HSA's; on the other hand, some feel that consumers will neglect preventive and early treatment for conditions that may result in more expensive treatment later. The Eflex Group is a major player in these plans and information can be obtained at eflexgroup.com. There was also discussion on Direct Reimbursement which is a form of consumer directed plan that usually requires individuals to pay for treatment out of pocket and then be reimbursed some portion by the employer. DR has been working in all areas of the country except for the Northeast and California. The cost benefit exists mainly for small employers with 50-250 lives.

Members of the council met with representatives of the NJ Oral Surgery Society to discuss treatment that is covered under both medical and dental plans. Many problems are Delta specific. These problems have been discussed with Delta and have been resolved. Delta has agreed to assist in tracing medical claims for oral surgeons who do not receive a response in 60 days.

Delta Dental has a new plan called Patient Direct. This is a referral plan where Delta is soliciting dentists in its PPO program to sign up to accept this plan by signing an addendum to the participating agreement. The patient purchasing this plan would receive a list of dentists who agree to accept a discounted fee as payment. This fee would be paid by the patient directly to the dentist. The PPO fee schedule and other Delta regulations would apply. In doing this Delta joins a number of other major commercial carriers with a referral plan. Horizon's equivalent is the Passport Plan.

Disease management is becoming a bigger issue with the dental insurance carriers.

Delta is promoting links between oral health and overall health. This follows articles published by Horizon and useful information published on the Met Life website. They are all pointing to the advantages of regular dental exams facilitated by maintaining a dental benefits plan. They are also promoting the links seen between oral health and systemic disease. Met Life currently has Pediatric Risk Assessment Guidelines available on its' website.

The council reviewed the ADA third party complaint form which is available on the ADA website. It turns out to be a simplified version of the NJDA form. The difference being that the ADA form is for informational purposes only; while the NJDA form is patient specific, requires patient authorization, and is acted upon by NJDA staff. Members are encouraged to take advantage of this great member benefit in resolving claims issues with insurance companies.

The council reviewed the new AFLAC dental plan available to individuals in NJ. This plan is not subject to COB regulations and pays regardless of other coverage. Delta however requires that dentists include this plan as "other coverage" on claims submitted to Delta for payment. Dentists may note in the comment section that there is no COB.

NJDA has been meeting with state departments of Health and Senior Services, Human Services and Education to discuss a plan of providing dental care to disadvantaged children. There was legislation recently signed that reopens NJ FamilyCare eligibility to certain low income parents and allow eligibility for uninsured children regardless of family income.

Dentists are encouraged to fully incorporate Best Management Practices (BMPs) into their office routine. There is currently legislation being proposed that would require dentists to install amalgam separators in their offices. The financial impact to dentists could be tremendous if enacted. NJDA is working to keep the impact to a minimum with the hope that by dentists employ BMPs voluntarily. This proactive approach could be used to convince legislators that dentists are on the forefront of amalgam waste management, thus avoiding costly regulations. ADA resources are available at www.ada.org/prof/resources/topics/amalgam_bmp.asp.

Gov. Codey's reorganization of the Public Health Council removed its decision making authority right before it was scheduled to make a decision on water fluoridation. The rulemaking was placed in the hands of the Commissioner of Health and Senior Services Dr. Fred Jacobs. While Dr. Jacobs expressed his support to NJDA, no action will be taken until a study examining the current maximum allowable level for fluoride is released later this year.

NJDA had submitted comments to the State Board concerning the patient records rule that would require documentation of informed consent discussions including cost. After taking NJDA's comments into consideration the final adoption notice was published with clarification as requested by NJDA. An informed consent is not required for each procedure. Patient records should "reflect a thoughtful discussion of relevant treatment risks and alternatives, as well as the cost of recommended treatment." The rule reads: A diagnosis and treatment plan, which shall also include the material treatment risks and clinically acceptable alternatives and costs relative to the treatment that is recommended and/or rendered.

MCDS Board of Trustees Report, continued from page 3

New Business

Dr. Robert Ashman will serve as program chair next year.

A committee was appointed to determine what to do with the society's reserve funds in providing benefits for members.

Respectfully Submitted,

Mark Vitale

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St. Peter's Medical Library

Members of the Middlesex County Dental Society are allowed to borrow dental materials from the Medical Library at Saint Peter's University Hospital. A valid ADA ID must be presented in order to borrow materials. Here is a list of some of the materials in the dental collection:

- Excellence in Cosmetic Dentistry-Video Series;
- Gordon Christensen Video Tapes;
- Journal of oral and maxillofacial surgery;
- Oral surgery, oral medicine, oral pathology, oral radiology, and endodontics.

Information about the Medical Library, including hours of operation, can be found at www.stpeterslibrary.com

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See our website for a complete list of Board Members and their contact information



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