Issue 131 March 2012

Upcoming Meetings in 2012 Arranged by the Education Committee

March 20, 2012

Dr. Robert Vanarsdall "Ortho and Perio Relationships"

Sy Symanski Memorial Lecture

April 17, 2012

Dr. David Lederman "Keys to Early Detection and Diagnosis of Oral Cancer"

May 15, 2012 STAFF NIGHT



SAVE THE DATE

for MCDS' Centennial Celebration Saturday, October 13, 2012 at the East Brunswick Hilton

The Dental Newsletter





www.MCDSofNJ.org

A Publication of the Middlesex County Dental Society

President's Message ... Robert Ashmen



Well it's certainly been a very kind winter, considering it's now March. Quite different than one year ago, for sure! Happy St. Patrick's Day to one and all. In no time we'll be celebrating another exciting Staff Night, so mark your calendars for a country western evening of fun and dancing not to be missed. Registration forms are included in the newsletter, as well as on the website.

Before we get that far ahead, I'd like to take a moment to thank Hal Baumgarten for an excellent presentation last month. It is always a pleasure to have him back to speak to us. This month we are excited to present Dr. Robert Vanarsdall, speaking on the subject of orthodontic and periodontal considerations in patient treatment. He developed the post-graduate program in Orthodontics and Periodontics at the University of Pennsylvania School of Dental Medicine, and we look forward to an interesting presentation.

Our centennial year for MCDS is now two months underway,

Continued on page 2

GENERAL MEETING – Tuesday, March 20, 2012

THE PINES Route 27 • Edison, NJ

Registration	6:00
Business Meeting and hors d'oeuvres.	6:30
Dinner and Speaker.	
2 mm or promise	

Featured Speaker: Dr. Robert Vanarsdall: "Ortho and Perio Relationships"



Dr. Robert Vanarsdall is Professor of Orthodontics and Director of the Division of Advanced Dental Education at the University of Pennsylvania, School of Dental Medicine where he has been teaching full-time for over 40 years. He is board certified in both Orthodontics and Periodontics. In addition to his teaching commitment, he maintains a private practice. For 17 years he served as Editor-in-Chief for the International Journal of Adult Orthodontics and Orthognathic Surgery in addition to other editorial board commitments. In addition, he has published chapters in 12 other textbooks and over 100 scientific articles and abstracts.

This presentation will review the evolution of orthodontics in solving periodontal problems for patients requiring restorative and prosthetic treatment. Tooth movement has been shown to reduce pathologic levels of periodontal pathogens. Forced eruption of hopeless teeth can be used to alter the soft and hard tissue for site development prior to placing implants. Although long-term prognosis of implants in periodontally susceptible patients is not any more favorable than that of teeth with healthy but reduced periodontal support, discussion will focus on the improvement of the periodontium with tooth movement. Skeletal relationships clearly identify patients more susceptible to periodontal breakdown and transverse skeletal discrepancy is a reliable predictor of increased risk of gingival recession. Major emphasis will be placed upon orthodontic diagnosis and factors enhancing treatment success.

MCDS Board of Trustees Report

-2/15/12-

Attendance: Ashmen, Desai, Fernandes, Mir-Madjlessi, Schambra, Silverstein, Vitale, Weiner

Acceptance of Minutes-vote unanimous.

President's Report-Robert Ashmen

MCDS's centennial celebration dinner dance will be at the East Brunswick Hilton on Saturday, Oct 13th 2012. Details for the event are being finalized. The band has been finalized. All MCDS past presidents will be invited. Middlesex senators and congressmen, the Governor of New Jersey, President Obama and other dignitaries will also be invited.

Treasurer's Report-Alyssa Bernstein

See full report on page 3.

Educational Coordinator's Report-Devang Modi

I am currently negotiating a contract with a Deejay that came highly recommended who along with 1 partner would play upbeat country music through the entire evening and give everyone dance lessons. There would be line dancing instructions and then we can dossie doe on our own. He has been doing this for 7-8 years and Deejays' in South Jersey at a country music club- "Prospector." I have also researched and am waiting for final numbers on other Western themed activities such as mechanical bull (floor padding, insurance included). The Pines administration is ok with the idea. The Pines would serve mashed potatoes, barbecue chicken, ribs, and corn, veggie and beef sliders. The bar would serve soft drinks, beer and margaritas (instead of wine). I am waiting for final numbers to see what is financially feasible.

NJDA Council Reports:

Annual Session-Nainesh Desai

Following a very successful meeting from 2011, the 2012 Garden State Dental Conference and Expo will be at the same location, The Ocean Place Resort, in Long Branch on June 22nd and 23rd. The theme of this meeting will be "Technology" and famous practice management expert, Linda Miles will be the keynote speaker on Friday. The Speaker line-up for Annual Session is complete. We have nine speakers that include the Hi-Tech symposium. We are offering a lead tracking company for the exhibit floor. The exhibitors will purchase this system directly through Trakkers and we will see a small royalty. The data given is standard lead data to include email addresses. On February 1st online registration for Linda Miles has begun. Full online registration begins March 7th as does hotel room bookings. The room will again be \$239. + tax per night and on March 12th, the registration book will be mailed out. Potential exhibitors are being contacted routinely. Tricia DeCotiis and Eric Elmore will be visiting the components in March and April. They will be doing a small presentation at the upcoming MCDS general meeting on March 20th. Preparations are also on for the 2013 meeting. It will be a weekend event as well and will be at the same location. A speaker list is being finalized and sponsorship is being sought for the same. Dr. Gerald Chiche will be the keynote speaker on Friday. Saturday meeting in 2013 will have a 'Showcase of New Jersey talent" with many locally known and speakers.

Dental Benefits-Devang Modi

The CRP statistics for entire 2011 showed 112 cases. Metlife had the most number of cases (29) followed by Aetna (18). Majority of those cases were related to refund requests. We did not receive a breakdown by county or component. Dr. Sid Whitman- Chair of Medicaid Committee was nominated and accepted the position to be a liason between the Council and Medicaid. An invitation has been extended to Dr. Scott Navarro, Director of Delta Dental of NJ to attend the September meeting. There are important changes to the state employee

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and we want to remind all members of the exciting evening celebration we have planned for this fall. Again, the night is October 13th, 2012 at the East Brunswick Hilton, so mark your calendars. It will be an evening of fun, excitement, reminiscing, and so many things to see. The band, the Bassboards, will be playing great music through the evening, so be ready to dance a bit.

I am also very excited to report that Give Kids a Smile was a great success again this year. Thanks to great work and efforts there were a tremendous number of children examined and treated throughout our state. Thanks to all that volunteered their time and energy to achieve this wonderful accomplishment, and very special thanks to Dr. Cavan Brunsden who has served as a leader to this effort for so many years. It's a truly fantastic and invaluable program.

I hope the leprechaun and the weather are good to everyone, and I look forward to seeing everyone at the Pines Manor this month.

Expanded PAC Report available in the online version of this newsletter

Due to space constraints in the printed version of the newsletter, we are not able to include the recent PAC report (it is 13 pages long). Please check out the online version of the newsletter to see all of the important issues related to dentistry that our PAC is working on. Your PAC contributions enable us to have a say in all of these issues. Login information is below.



Published at the office of Dr. Robert Silverstein www.MCDSofNJ.org login: mcds password: mcds1912

Detailed Treasurer's Report January 31, 2012 Alyssa Bernstein, DMD

	1/31/11	12/31/11	1/31/12	
Checking	\$10,711.49	\$21,047.61	\$18,359.82	
Savings	\$24,139.71	\$24,215.61	\$24,220.74	
PayPal	\$3,378.71	\$3,324.24	\$3,324.24	
TOTAL:	\$38,229.91	\$48,587.46	\$45,904.80	
P&L ST	TATEMENT (CHECKING A	CCOUNT	
(1/1/2012-1/31/2012)				
INCOME				
DUES			560.00	

IIVCOIVIL	
DUES	560.00
INTEREST	1.03
TOTAL INCOME	561.03
EXPENSES	
CONT. ED EXP	401.86
EXECUTIVE SECRETARY	1,350.00
INSURANCE	187.44
MEMBERSHIP EXP	881.10
OFFICE SUPPLIES	242.00
TELEPHONE	186.42
OVERALL TOTAL	-2,687.79
P&L SAVINGS ACCOUNT	
(1/1/2012-1/31/2012)	
INTEREST INCOME	5.13

Provide MCDS with your email address!

5.13

OVERALL TOTAL

As those of you who have registered your email addresses with us know, the Board is becoming more proactive in notifying you with timely unformation, such as upcoming early registration deadlines, reminders about the change in date for the April General Meeting, course reminders, etc.

By having your email address, we can get such vital and timely information to you.

Register by going to our web site (www.MCDSofNJ.org), then the member page, then "Of Current Interest." It's the third link down. The username is mcds, and the password is mcds1912

Provide NJDA with your email address!

By having your email address, NJDA can get vital and timely information to you. Register at www.NJDA.org.

MCDS Board of Trustees Report

Continued from page 2

dental plan for retired teachers where the maximum has been reduced and there is a change in the co-pay percentages for out of network. Mr. Jim Schultz reported they are watching 84 bills this year including whether fluoride and the cost of water fluoridation is effective and safe, the affordable care act (Obama Care), access to care issues and dental patients over crowding emergency departments. Most importantly, the Council as a special order of business met with representatives from iMedicor. iMedicor is a HIPAA compliant communication network to transport electronic data (medical records, files, images, insurance claims etc...) safely and securely to other providers or insurance company. Besides the exchange of information, it offers CME credits, peer review articles and other staff development programs. Their website is imedicor.com. Also, there is a Medicaid Federal Incentive Fund where an eligible dentist (must see at least 30% Medicaid patients, including HMO's and maintain electronic health record, EHR) can receive \$21,250 per provider in the 1st year and \$8,500 in years 2-6 for a total of \$63,750. You have to maintain and prove certain criteria under the "meaningful use guidelines." For further details and clarification visit their website or contact them directly. The Council is NOT endorsing this company at this time and will continue to do more research.

Governmental Affairs-Mitch Weiner

Smile Check 2012- This is a program initiated by NJDA that grew out of the Pew Report on Oral Health Access in NJ that gave NJ an "F". NJ, due to the fact that we have no state dental director, has fallen behind other states in collecting data on the oral health of children in the state. The NJ Oral Health Surveillance Program (Smile Check), much like the similar CDC program, will give a better understanding of the dental caries rates in NJ children. Screenings for caries and sealants will be performed using volunteer dentists on 3rd grade children. Both the NJ Dept. of Health and NJ Dept. of Education are supportive. Delta Dental has donated \$10,000 towards the effort and the program is seeking another \$2500 from NJDA.

NJDA General Supervision Legislation- This got through the Assembly, but its movement was slowed down in Senate Commerce Committee hearings (they met only 3 times since summer) and the legislative session ended without action by the Senate. Now, with the new legislative session about to begin, the bill must be re-introduced and we must push for it to be heard again. The task will be tougher now since the Assembly will be less likely to move fast on legislation that the Senate sat on in the past, but we are optimistic that our relationships with important legislators will allow us to give the bill new life.

Cosmetic Surgery Tax Repeal Phase Out- This would phase out the 6% cosmetic surgery tax by 2% a year over 3 years. It passed out of both houses and is now on the governors' desk. It looks very favorable that he'll sign it. Hospitals are not happy with the bill (Charity Care will take an \$11 million hit) but the 3 year phase out will make it more palatable.

Pharmacological Injectables Regulation Update- Due to an inquiry by a pharmacological injectables course organizer to the State Board, it was ruled that injectables in the forehead/crows feet region are not allowed to be performed by non-OMFS dentists. NJDA Legal Counsel and Executive Director Art Meisel feels that the position taken by the State Board is indefensible. If the scope of practice in this region covers OMFS, so should it cover other dentists. Many non-OMFS dentists took these pharmacological injectables courses for training to do such injections and now feel they spent their time and money for naught. NJDA will act on this matter in a timely fashion.

Anti-Assignment Clauses Lawsuit- Ruled against NJDA in the Appellate Division. Art Meisel feels they were wrong. The NJDA Board of Trustees has authorized Mr. Meisel to seek review by the State Supreme Court. It is not guaranteed that



MCDS Board of Trustees Report, continued from page 3

the lawsuit will progress to the NJ Supreme Court. Maximum Fees for Non-Covered Services- We are awaiting a decision as the case was argued over 3 months ago. Illegal Teeth Whitening (Beach Bum Tanning Lawsuit)- Based on unfair competition. This is being argued on January 19th. Recovering Overpayment from Out-of-Network Dentists Lawsuit- No argument date has been set yet. It will probably be in early-mid February. State Board Appointments- Many current State Board of Dentistry members are hold over's that have had their terms expire and are still serving. Most are seeking re-appointment. In addition, there are 9 dentists who are not currently on the board seeking to fill these expired positions. The governor's office, as a courtesy to NJDA, seeks the council's recommendations and the council reviews the CV's of the candidates should they request our backing (2 CV's of new candidates were reviewed during the meeting). This does not guarantee that our feedback will have any influence on the governor's decisions and to date no new appointments have been made.

Physician-Dentist Loan Redemption Program Legislative Idea- There is a program that allows up to \$20,000/year in loan redemption but GP's in private practice are not qualified unless they practice in offices that have sliding fee schedules. Many NJ underserved Medicaid dental practices cannot have sliding fee schedules by state law. Our legislative proposal seeks to redefine the qualifications to include these types of dental practice structures to facilitate NJ's newer dentists' access to this loan redemption program. We feel that by creating this impediment and making NJ less desirable for young dentists to work in, the law as it stands negatively affects access to care. 2012-13 Legislative Priorities- A brief discussion concerning possible legislative priorities ensued, including a mention of NJ's need to develop its own state health insurance exchange before the fed mandates its own on NJ and what role oral health coverage will play as its formation takes shape.

Membership-Tara Savage

NJDA finished 2011 with 79 fewer members than the previous year. A similar pattern in membership decline was seen for other northeast states. There were a total of 74 dues waivers in 2011 as compared to 114 the previous year. There were 203 new applications received in 2011, which was only a small decrease over the previous year which had 217 new applicants. The NJDA membership directory is now available on-line and will no longer be available in a printed format. Last spring NJDA submitted an application for the ADA's Membership Program for Growth and was awarded a \$15,000 grant to be used for membership growth. Recently, NJDA applied for a second grant and was awarded another \$15,000. The NJDA membership growth plan will focus on select ethnic/gender groups, in particular Indian and female dentists. The first event being hosted and sponsored by the NJDA as part of its membership growth plan is a continuing education program for women prac-

Continued on page 5

MCDS Board of Trustees Report, continued from page 4

titioners. The speaker for this event will be Eva Grayzel. She will be speaking on oral cancer and the patient experience, and sharing her experience as an oral cancer survivor. This program is scheduled for Friday, April 20, 2012 from 9am to 11am. Breakfast will be at 8:30 am. The program will be held at the Sheraton Eatontown on Route 35 in Eatontown, NJ. The cost is \$25 for NJDA members and \$50 for non-members. 2 CE credits will be awarded. Call 732-821-9400 for reservations. Other events the NJDA is planning as part of its membership growth plan include a non-member luncheon at the Garden State Dental Conference & Expo on Saturday, June 23, 2012 and an immigration law continuing education course which will be held on April 11, 2012 from 9am to 11 am. Steve Rauchenecker and Kristen Belleson from the ADA Membership Outreach were invited to attend the Council on Membership meeting on January 24, 2012. They provided a two hour membership recruitment training session and shared valuable and proven techniques for recruiting nonmembers.

Peer Review-Sandy Goldstein

There were no new cases assigned or mediated last month.

Committee Reports:

Corporate Sponsorship-David Stein

For corporate sponsorship, I have been working with Drs. Vitale and Rosen to have sponsorship for the centennial dance. Also Drs. Glickman, MirMadjelessi and I have reached out to Nina Benton and are organizing an event for them to speak about their product.

Mentor-Nima Mir-Madilessi, Amit Vora

The next bi-annual OSHA program that satisfies the OSHA standard on Occupational Exposure to Blood Borne Pathogens, which is required annually for dentists and staff, will be given on June 7, 2012 at St. Peter's Medical Center, New Brunswick. Two CEU credits are awarded to the Dentists & staff members attending these 2-hour seminars. These seminars are available to our members & staff for \$25/pp as a member benefit of MCDS. A very big "Thank You" to Dr. Joe Fertig, Director of Dental Services - St. Peter's Medical Center, for arranging all our room accommodations for the MCDS OSHA-Mentor programs at St. Peter's Medical Center in New Brunswick. Please see the insert in this newsletter for additional information and registration for the Mentor/OSHA program.

Dental Hygiene Study Club-Alyssa Bernstein

The Central New Jersey Dental Hygiene [CNJDH] Study Club met on Wednesday January 11, 2012 at the Crowne Plaza Hotel, Rte 27S Edison, NJ. The speaker was Dr. Shampsee and the topic was "Osteoporosis". Two CEU credits were awarded to the 25 hygienists that attended. The next meeting of the CNJDH will be on Wednesday March 7 and the speaker will be Dr. James Albani. Two CEU credits will be awarded for this seminar. This CNJDH study club is available to our hygienists as a Dentist-member benefit of MCDS. Please contact Marlene Glickman, our Executive Secretary for MCDS, at # 732-238-1255 for additional information and registration in advance for the program. Thank you.

MCDS Study Club-Tara Savage

The next MCDS study club meeting is scheduled for Thursday, March 29, 2012 at 7:00 pm. Dr. Larry Brent will be giving a presentation about his experience using the "Onset" local anesthesia buffering from Onpharma and he will also be presenting some cases which he has treated. 2 CE credits will be awarded. The meeting will be held at the NJDA headquarters in North Brunswick. The study club is a member benefit available to all MCDS members. There is no fee for the lecture, except that attendees share in the cost of dinner. Please contact Marlene Glickman, our Executive Secretary, at 732-238-1255 for additional information and registration in advance.

New Business

Dr. Mark Vitale brought up two matters of importance brought up by NJDA staff about non-members. First, Tricia from NJDA wanted information about the protocol of MCDS for the nonmembers coming to the general meeting. Her thought was that NJDA may want to streamline this protocol and have possibly a common protocol for all component dental societies to handle this matter. Dr. Vitale said that a dollar amount needs to be set in our annual budget for this per meeting or per new nonmember/senior student that would like to attend. Dr. Weiner suggested that the focus should be on the non member dentists during the October, November and December meetings and for the February, March and April meetings, the focus should be on senior dental students. The board agreed that allocation may have to be made in the budget. The matter and the numbers will be finalized at the next board meeting. Also, Maureen from NJDA has asked if MCDS will be willing to bring and invite non members on a one to one basis for the luncheon on Saturday, June 23rd, of the annual session.

Secondly, Dr. Vitale brought up the issue about the reception by MCDS on Friday night at the Annual Session of 2012, as part of the centennial celebration. Dr. Vitale proposed and the board approved that two tickets will be given to all registering MCDS members and \$35/ticket for any nonmembers that want to attend our reception. He will discuss with Maureen to add a line item for the same in the registration packet.

Good & Welfare

Dr. Robert Ashmen's wife, Robyn, had a successful Renal Transplant last month. Congratulations and good luck to the couple on the successful outcome.

Respectfully Submitted, Nainesh Desai, Secretary

6:00-7:00 Cocktails

STAFF NIGHT TUESDAY, MAY 15, 2012

YEE HAW, HOWDY Y'A LL

7:00-9:30 Dinner, Music, Activities



Round up your boots and put on your hats
trab yer pardner to do-si-do
it's time for a
rootin, tootin, hee hawin, foot stompin
hoedown!

or a Win, foot Stompin In:

Saddle up and mosey on over to the pines

MCDS STAFF NIGHT REGISTRATION FORM

(See our web site for Online Registration which allows payment by credit card)

Cut-out and send check for total payable to MCDS to:

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

ľ	vidulesex county Dental Society, 1.0. Box 70	720, Last Branswick, No 00010	
Doctor's Name:			
Names of Staff			
Members:			
MCDS Member Dentists and Staff: \$85/person until 4/1/11, \$90 per person after 4/1/11			
Total # Attending:	Total Remittance:	Includes Open Bar	

Highlights from the February 2012 Meeting



MCDS President Dr. Robert Ashmen and Education Coordinator Dr. Devang Modi with February Featured Speaker Dr. Harold Baumgarten and MCDS Life member Thomas Paterniti.



MCDS members Dr. Ira Rosen and Dr. Maya Prabhu with John and Nina Benton from sponsor New Providence Financial.



MCDS member Dr. James Courey with sponsor Biomet 3i.

NJDA Noteworthy News

The Board approved the nomination of Dr. Michelle Weddle as Central's representative to the Council on Dental Benefit Programs, replacing Dr. David Lipani.

Dr. Mike Messana,NJDA President Elect, submitted a request for \$2,500 to fulfill NJDA's obligation in order to receive a \$10,000 grant from Delta Dental Foundation. The grant is towards NJDA's major Access to Care initiatives, Smile-Check. This is a pediatric oral health screening only for 3rd graders on caries and dental sealants. We are in partnership with the Department of Education and the Department of Health; the NJDA Coordinators are Drs. Michael Messana and Ethan Glickman. Twenty-four schools have signed up for the screenings and we have completed three to date. On Friday, 1/20/12 51 students were screened; on Monday, 53 students and on Tuesday 74 students. Of these 18 students needed dental services and nine needed immediate service. Eric Elmore is the staff person working on this program and is trying to find dental homes (dentists) for these students. This data has never been collected before in NJ and we will be sending it to the CDC. We are hoping this will improve a failing rating received by the State in the PEW report and also provide data to develop a benchmark for grant programs.

It was also reported that as we have no data regarding fluoridation, so we have joined with the school of public health at UMDNJ where three students have been assigned to do a study on community fluoridation. As a result of this venture, we have received \$5,000 from Colgate for executing this study.

Mr. Arthur Meisel asked the Board for authorization to replace the 10 year old company owned van with a new leased vehicle. He reported that Stan Orenstein researched into leasing the van rather than purchasing. He looked at a Ford Edge, Hyundai Sante Fe and a GMC Terrain. The Board asked about the difference in pricing and questioned the benefits of leasing over purchasing. After an explanation of costs for purchasing vs. leasing and how the van is used, a motion was made, seconded and adopted to lease a Hyundai Sante Fe for 3 years.

In addition Mr. Meisel noted that one of the roof top air conditioning units needed to be replaced. The cost to repair it was \$6,000 vs. purchasing a new unit at \$9,500 to \$10,000. The Board approved the purchase of a new air conditioning unit. In an effort to open communication between components and share information and ideas, Dr. Vitale suggested that each component email a copy of their monthly newsletter to each of the component Trustees and Presidents, along with NJDA officers. With the Board in agreement, Mr. Meisel will have staff compile a list of the appropriate email addresses for distribution to the components.

Dr. Shah reported that Monmouth-Ocean intends to hold a meeting in March to recruit all residents in the area. Its Committee on New Dentists plans to invite seniors from Columbia, NY City, Pennsylvania, Temple & UMDNJ to come and see what organized dentistry is like. They have budgeted \$3,000 towards this, however, they are asking if NJDA could contribute something. The concern is they have no way of knowing how many will respond and if its over Monmouth-Ocean's allotted total amount, can NJDA help so that they do not have to turn anyone away. The Board approved a \$500 subsidy for Monmouth Ocean to assist in this recruitment effort.

Governmental and Public Affairs

Mr. Schulz reported that Senator Menendez is working on obtaining two million dollars for NJ to be used for the Dental Lifeline Network, formerly DDS.

The General Supervision Bill did not pass, because we just ran out of time. On January 10th the bills were reintroduced. The new number in the Assembly is A1759and in the Senate, S298. As of January 10th, we are actively engaged in 79 pieces of legislation.

The Governor signed into law a bill providing for a phased repeal of the cosmetic medical procedure gross receipts tax. Mr. Schulz introduced Miss Meera Rathi, a Rutgers senior majoring in Public Health and a pre-dental student. She will be working with Mr. Schulz as an intern. It is a 6 credit internship.

Meeting and Events

Ms. Maureen Barlow reported that she has been working to unify the presentation of NJDA Meetings and Events and to work with a local caterer to attract other associations and societies to hold their meetings here at the Association building. It is hoped that the more people we have utilize our building, the more familiar they will become with NJDA and, hopefully, result in an increase in membership.

Ms. Barlow reported that the Speaker line-up for Annual Session is complete. We have nine speakers that include the Hi-Tech symposium.

We are offering a lead tracking company for the exhibit floor. The exhibitors will purchase this system directly through Trakkers and we will see a small royalty. The data given is standard lead data to include email addresses.

She reported on some dates the Board members should make note of: February 1st online registration for Linda Miles begins. Full online registration begins March 7th as does hotel room bookings. The room will again be \$239. + tax per night and on March 12th, the registration book will be mailed out. She reported that everyone should check their Continued on page 8

NJDA Noteworthy News, continued from page 7

emails and if you see 'constant contact' on your email, it is from us.

Ms. Barlow stated that Tricia DeCotiis and Eric Elmore will be visiting the components in March and April. She is asking for a \$500 sponsorship from each component and, in turn, the components can place an ad in the Conference Newsletter (sample of which was passed around at the meeting). There is a 250 word limitation for the ad.

Ms. Barlow and Dr. Delson checked out the new Rebel Hotel in Atlantic City as a venue for NJDA's convention. The Council agreed to keep the Annual Session at Ocean Place in Long Branch for 2013. In 2014 she will again look at the Rebel Hotel in A.C. as well as Crystal Springs in Sussex.

NJDA's Annual Golf Outing is scheduled for Monday, August 13th with a raindate of Monday, October 15th. Membership

Ms. Tricia DeCotiis reported that the year end membership number was down by 75 members as compared to 2010. She continued by assuring everyone that we are working as a team in demonstrating what we do and that there is value in membership. Nationally, we were informed that the ADA removed the civil service group out of the 4th District and we do not know how this will affect our delegate numbers. We received approximately the same number of new applications in 2011 as we did in 2012 and received approximately 40 fewer waivers.

The NJDA is a recipient of grant money from the ADA for the 2011-2012 and 2012-2013 Membership Program for Grant Initiatives. We received a \$15,000 award for each for a total of \$30,000. The ADA fully supports what we are doing here at NJDA. At the membership meeting yesterday, the ADA Director of Membership Outreach and a Membership Manager attended to provide recruitment and retention training. The ADA is fully vested in NJDA and plans to attend Annual Session as well. At Annual Session, the Walkway Street Fair area will be home to a membership pavilion.

The NJDA will also host a non-member luncheon on Saturday afternoon at the Annual Conference marketing toward women dentists and foreign dentists. We are asking members to bring non-members.

We are offering a Continuing Education Program on Friday, April 20th. Our speaker is Eva Grazel who is an oral cancer survivor. For members the fee will be \$25.00 and for non-members, the cost is \$50.00. The program will be targeted at female dentists. Laurie Woog, Esq. will present a course on Immigration Law on April 11, 2012.

Communication

Mr. Elmore spoke on the new Partners Program which memorializes the merging of two NJDA non-dues revenue sources; the Endorsed Programs and the Partners Program. He distributed a memo on the explanation of the Partners Program Levels of annual contribution and how endorsed programs that do not meet the initial level (Pearl) due to different forms of participation; i.e., royalty plans that may bring in less than the first level of the Partners Program have been "grand-fathered" so that the endorsed company can be placed into its proper slot in the partner level. The Committee to Review Endorsed Programs will be changed to the Committee on Partner's Programs. He announced that we lost HealthCard as a Partner because they were recently purchased by Global. He also reported that ADP was dropped as an Endorsed Program for a number of reasons; mainly because they are not interested in participation. The good news is that the contract for Staples has been signed. Staples is mailing to our entire membership its program and is setting up a website. Basically we have to sell \$100,000 before we receive royalties; however, that includes purchases of furniture, all technical equipment, everything. B.C. Szerlip royalties are up and I.C. System reviews are up 300%. I.C. Systems is much more engaged with us. They held a course here and picked up seven clients that day.

Mr. Elmore updated the Board concerning NJDA's Social Media. We received 361 likes on our Facebook page, 51% were females; 41% were between the age of 25-34 and 22 were from other nations. We received 374 likes on our GKAS Facebook and 8 likes on the Garden State Expo. We have 3 Board members on twitter and 2 on Linkedin.

He reported that 515 members responded to the survey and he distributed an overview of the responses to the Board. Dental Benefits

Ms. Mary Moskal reported that the deadline for applying for the Medicaid Electronic Health Records (EHR) incentive payment has been extended to March 23, 2012 related to calendar year 2011. In order to quality, at least 30% of a dentist's patients must be Medicaid beneficiaries and the dentist must document "meaningful use" of a certified electronic records system. The payment is made per dentist (not per office), but the dentist, if an employee, has the option to sign over the payment to the practice owner. Eligible dentists must register with the CMS National Level Repository; however, many independent consultant groups have emerged offering to submit applications for dental offices for a percentage of the incentive payment. On a related note, NJDA still receives calls from dentists who are being told by various salesmen that they must convert to electronic claims by 2014. In fact, the 2014 date applies to physicians and others participating in the Medicare program. Similarly, some companies are erroneously advising dentists that defibrillators are required in their offices. When in doubt, members should contact NJDA before making a major investment.

The Council on Dental Benefits met on February 8th, and representatives from iMedicor attended to update the council on

NJDA Noteworthy News, continued from page 8

the status of its secure web portal. Some council members were involved in the testing phase of the portal, and it appears that the company may also be providing consulting services to dental offices on electronic records and the EHR incentives. As an aside, Ms. Moskal suggested that it may be an appropriate time to schedule a HIPAA course for members due to the amendments to the security portion of the law.

Ms. Moskal reported that a meeting has been scheduled with the new Acting Director of the Division of Insurance (Peter Hart). Among the items to be discussed is MetLife and its apparent regulatory violations.

Finally, NJDA has received unofficial word that the Aetna State Employee Dental Plan has been changed to provide a lower level of coverage to employees who seek treatment outside of the Aetna PPO network. However, the state's website does not yet have the 2012 Employee Dental Plan Manual posted, so it is not confirmed.

Executive Director's Report

Mr. Arthur Meisel reported on the new injectable pharmacologics regulation. At the December 7, 2011 State Board of Dentistry meeting it was reported that dentists cannot inject in the area of the forehead, the peri-oral area or to treat crows feet unless it is part of a dental treatment plan. Earlier it was stated that if dentists completed an approved course of at least 21 hours at an accredited dental school, in a hospital based program or

in a college or university setting they could administer injectables. Mr. Meisel was out of the country on December 7th and was not aware of the limitations imposed by the Board until he read it in the December 7th minutes on January 3rd. At the January 4th State Board meeting, Mr. Meisel raised the issue to the Board and some State Board members realized that they created quite a problem. Mr. Meisel reported that the AGD Board was looking into the problem. He feels we need to comment further and the Board agreed.

He will be filing a petition for certification with the Supreme Court in the lawsuit against Horizon challenging its antiassignment clause. The Court will then decide whether it will hear the matter.

The Met Life lawsuit was argued in the Appellate Division about three months ago. Mr. Meisel reported that he received a call asking if he objected to having a third judge added to the panel. This could mean that they view this as being an important case.

Mr. Meisel also reported about oral argument in the Beach Bum lawsuit.

In the Horizon overpayment recovery suit, no argument date has yet been assigned.

Mr. Meisel repeated that at this time dentists should not inject on the forehead or to treat crowsfeet.

The Executive director received the ADA's membership numbers. NJDA Component are as follows: Atlantic-Cape May- even, Bergen- loss of 13, Central- loss of 11, Essex-loss of 6, Hudson- gained 6, Mercer- lost 5, Middlesex-lost 4, Monmouth-Ocean- lost 16; Passaic- lost 3, Southern- lost 21, Tri-County- gained 1 and Union-lost 3. The constituents: Connecticut, Rhode Island, New York, Pennsylvania, New Jersey, Maryland and Florida lost members. Massachusetts, California and Texas gained. Nationally, the ADA gained about 600; however, there was a loss in full time active members.

Council on Nominations

Dr. Richard Kahn, Council on Nominations Chairman, reported that according to the Bylaws, each position for NJDA officer is open for nomination except the President-Elect who automatically becomes President without being elected. Nomination shall be made in writing either by a component society or by a member of the Council on Nominations. In the event there is only one nominee for each office and the nominations are received at the office of the New Jersey Dental Association at least 7 days before the scheduled meeting of the Council, the meeting of the Council shall be cancelled and the nominees shall be deemed nominated. As we have only one nominee for each office, the following is the slate of officers for the administrative year 2012-2013: President-Elect, Robert A. Giantomas; Vice-President, Bryon Roshong; Speaker of the House, Walter I. Chinoy; Gregory LaMorte, Treasurer and Giorgio DiVincenzo, Secretary. According to the Bylaws, candidates can be nominated by personal petition up to 90 days before the House of Delegates meeting at Annual Session. The deadline date for nominations by personal petition or by component society is March 26, 2012.

NJ Dental School

Dr. Rosenheck reported that UMDNJ Dental School received 2300 applicants for the new year for a class of 90 students. Dr. Rosenheck received an update on the fate of UMDNJ. He reported that at the Governor's Press Conference, it was announced that the Robert Wood Johnson Medical School, the Cancer Institute of NJ and School of Public Health will become part of Rutgers. All the schools in Newark; the medical, dental, nurses and the University Behavioral Health Care will remain as a part of UMDNJ. UMDNJ will be known as New Jersey Health Sciences University. Rowan University will acquire all Rutgers' schools in Camden. University Hospital will no longer be part of UMDNJ. It will be maintained as the major hospital in NJ but run as a non-profit institution.

Middlesex County Dental Society

REGISTRATION FORM

Tuesday: April 24, 2012 6:30-8:30PM

Understanding
Long-Term Care Insurance
and how it can enhance your practice
&

Tax Efficient Retirement Strategies

presented by Nina Benton, CFP® - Financial Planner

This is a MUST ATTEND seminar for every dentist

in order to protect you and your practice

Objectives for the course:

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- · To learn how long-term care insurance can protect your practice
- To learn about tax benefits through Prudential's NJDA Program
- To learn about using Life Insurance to create a Roth-IRA Legacy

Time:	Registration: 6	:00 PM Pro	gram: 6:30	-8:30 PM	
Place:	New Jersey Den	tal Association	building, F	Route 1 South, Nor	th Brunswick
Tuition	1: MCDS & NJDA	A Member Dent	ists & Staff	\$25 per person	
	Non-Member I	Dentists & Staff		\$50 per person	
	(Payable 1	o Middlesex C	County Den	tal Society)	
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Richard KahnADA Delegate828-6622	Ira RosenJudicial Council422-7440		
Daniel Krantz ADA Alternate Delegate469-8083	Tara SavageMembership679-2323		
Mark Vitale	Sanjeev Satwah New Dentists		
Nainesh DesaiAnnual Session254-2550	Mark VitaleNJDA State Trustee494-7575		
Jeff Chustckie Dental Benefits	Nancy VillaNJDA Alt. State Trustee679-2323		
Robert Ashmen Dental Education846-6366	Sandy Goldstein Peer Review		
Mitch Weiner Governmental/Public Affairs 297-4900	Ethan Glickman Relief 572-4244		
– MCDS Committee Chairpeople and Members at Large –			
Ira RosenBudget and Finance422-7440	Alyssa Bernstein Hygiene Study Club388-3100		
Cavan Brunsden Children's Dental Health679-2323	Genevieve Fernandes Membership Hospitality613-1931		
Mark Schambra Continuing Education846-6366	Nima Mir Madjlessi Mentor Co-Chair651-8470		
David Stein	Amit Vora Mentor Co-Chair		
Maha Kaga Dental Shadowing873-3333	Cavan Brunsden Special Olympics		
See our web site for a complete list of Board Members and their contact information			

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NJDPAC Report

Your dues and your PAC contributions provide our profession with the ability to maintain the Profession of Dentistry as we know it; as opposed to what may happen if we loose control over it.

For those that ask, "What does PAC do for me?" I thought I would take a few moments and outline recent legislative affairs which impact on YOUR profession. In the course of my review I will mention the names of the legislators involved. While Jim Schulz and the PAC Board maintain outstanding relationships with these individuals, it is beneficial for you, the practicing clinical dentist, to reach out to these individuals, especially if you know them. They always hear from lobbyists. It's about time they heard from YOU.

- A.4116/S.2935, legislation sponsored by Assemblymen Vincent Prieto/David Rible and Drs. Senators Jeff Van Drew and Joe Pennacchio, will allow NJ licensed dental hygienists to practice on patients of record without a dentist physically being present in the office (general supervision).

This bill provides that any person who has graduated from a school or college of dental hygiene approved by the Commission on Dental Accreditation of the American Dental Association and holds a current certification in Basic or Advanced Cardiac Life Support by an association approved by the New Jersey State Board of Dentistry may, subject to the supervision of a New Jersey licensed dentist, practice dental hygiene in an office in which general dentistry or any special areas of dentistry recognized by the board is regularly practiced, or in any appropriately equipped school, dental clinic, or institution, except that a New Jersey licensed dentist may, in his sole discretion, require direct supervision in his dental office.

Also, the bill mandates that each licensed dentist may provide supervision to no more than three licensed dental hygienists at one time. Furthermore, the bill provides that a dental hygienist acting under supervision in a dental office or dental clinic may treat only patients who are existing patients of record.

As provided in the bill, the administration of local anesthesia, the monitoring of a patient administered nitrous oxide, and any other anesthetic procedures that may be designated by the New Jersey State Board of Dentistry, by regulation, shall be performed by a licensed dental hygienist only under direct supervision.

The bill stipulates that a licensed dental hygienist shall not perform any intra-oral service, other than administering preventive measures such as the application of fluorides, pit and fissure sealants as well as other recognized topical agents for the prevention of oral disease or associated discomfort and the detection of caries in a school setting, upon any living person who the dental hygienist reasonably believes has not received an examination by a duly licensed dentist within the immediately preceding 365-day period. After performing an

assessment, a dental hygienist acting under supervision who reasonably believes that a person has either dental caries or some other medical or dental condition requiring diagnosis or treatment by a dentist shall so inform in writing, within seven days, the dentist who is providing the supervision, except if it appears that emergent care is indicated, the dental hygienist shall immediately notify the supervising dentist.

In addition, the bill states that except as otherwise provided in various provisions of current law specified in the bill, no person other than a person duly authorized to practice dentistry in this State shall: (1) make any diagnosis or develop any treatment plan with respect to the dental condition or treatment of any living person in this State; (2) perform any surgical or irreversible procedure, including, but not limited to, the cutting of hard or soft tissue or the extraction of any tooth on any living person in this State; (3) either bill or submit a claim for any service rendered involving the practice of dentistry or dental hygiene in this State; or (4) receive payment for the performance of dental or dental hygienist services from any source other than an employer authorized by law to practice dentistry in this State or any dental clinic, institution, or employment agency that employs licensed dental hygienists to provide temporary dental hygiene services.

- A.3491/S.2577, sponsored by Assemblyman Herb Conaway and Senator Richard Codey, limits where certain cosmetic surgical procedures may be performed in New Jersey. Specifically, the bill provides that a physician is to perform certain cosmetic procedures only in an office or facility that is accredited by the American Association for Accreditation of Ambulatory Surgery Facilities, the Accreditation Association for Ambulatory Health Care, or The Joint Commission.

The NJDA DGA won amendments to the legislation to clarify the provisions of the bill, which restrict the settings in which certain surgeries may be performed, by stipulating that they apply to an "aesthetic truncal" (rather than a "body") contouring procedure. The provisions of the bill are not to be construed to apply to a licensed dentist or dually licensed oral and maxillofacial surgeon practicing in this State as the language has now been made clear that the procedures are outside of the dental scope of practice.

This bill was an action initiated by the plastic surgeons against all "doctor" groups whom perform "cosmetic" surgeries. The plastic surgeons acquiesced to the NJDA's amendment demands as the bill's initial focus was clearly aimed at the physician community and not dentistry.

- A.3646/S.1988, sponsored by Assemblyman Gordon Johnson and Vincent Prieto and Senators Paul Sarlo and Joe Kyrillos, phases out the cosmetic medical procedure gross receipts tax beginning July 1, 2011.

Under the bill, the 6 percent tax rate currently imposed on the gross receipts from cosmetic medical procedures is reduced by two percent per year over a three-year period: (1) on or after July 1, 2011 but before July 1, 2012 the rate of tax imposed will be 4%, (2) on or after July 1, 2012 but before July 1, 2013 the rate of tax imposed will be 2%, and (3) on or after July 1, 2013 the rate of tax will be 0%.

Under current law, a cosmetic medical procedure is any medical procedure performed on an individual which is directed at improving the procedure subject's appearance and which does not meaningfully promote the proper function of the body or prevent or treat illness or disease. Examples of taxable procedures include cosmetic surgery, hair transplants, cosmetic injections (Botox), cosmetic soft tissue fillers, dermabrasion and chemical peel, laser hair

removal, laser skin resurfacing, laser treatment of leg veins, sclerotherapy, and in office tooth whitening procedures.

The taxable impact on the dental community is less than \$1 million annually. For all procedures, the tax collects approximately \$10 million annually – far less than the projected \$26 million annually. Tax collection and compliance on this matter has been problematic from the beginning. The Division of Taxation has even indicated support for the elimination of it. Two legislative sessions ago, the NJDA along with its strategic partner in this fight, the plastic surgeons, passed taxation elimination legislation only to have it vetoed by former Governor Jon Corzine. This time, Governor Christie's office has tacitly expressed support for the elimination of this tax. It will be pushed during the Lame Duck session.

- S.2475, which is sponsored by Senator Linda Greenstein, would prohibit a health care provider from charging a patient a fee for rescheduling or canceling an appointment more than 24 hours in advance. The bill also prohibits the imposition of any cancellation or rescheduling fees less than 24 hours in advance of an appointment, or failing to appear at a scheduled appointment, unless the patient was given notification at the time when the appointment was made that a fee would apply, and previously canceled or rescheduled an appointment for the same or a similar reason less than 24 hours in advance, or failed to appear at a scheduled appointment, on two previous occasions in the past six months.

Further, the bill establishes a maximum fee of \$25 that could be charged by the doctor for rescheduling, canceling, or failing to appear at a scheduled appointment. The bill carries a penalty provision for violating it of up to \$500 for a first offense and up to \$1,000 for a second and subsequent offenses.

While the NJDA understands the sponsor's intention behind the legislation, we stand firmly opposed as drafted. At this time, the legislation has not advanced due to NJDA intervention, and we look forward to ensuring that any bill that may advance will not negatively impact our members' ability to manage their practices as they see fit.

-S.2317/A.3404, sponsored by Senator Loretta Weinberg and Assemblywoman Valerie Huttle, which establishes the New Jersey Center for Oral Health at the New Jersey Dental School of the University of Medicine and Dentistry of New Jersey, is advancing through the New Jersey Legislature.

The bill provides that the center would:

- * Develop and facilitate model public and private partnerships for oral health awareness campaigns to improve the access, acceptability and use of oral health services in this state;
- * Serve as an information and resource center for specific oral health information and data concerning oral health and disseminate such data to interested parties;
- * In consultation with the Commissioners of Education, Health and Senior Services, and Human Services, review, recommend, and develop appropriate oral health education materials and disseminate the materials to local school districts throughout the state;
 - * In collaboration with the Commissioners of Education and Health and Senior

Services, other State agencies, and private organizations, provide assistance to Early Head Start and Head Start programs and local school districts to develop programs in Head Start programs and elementary and secondary schools that stress good nutrition, sound oral hygiene, healthy lifestyles, and the prevention of oral disease;

- * Serve as an advocate for the adoption and implementation of effective measures to improve the oral health of this state and eliminate disparities among the various racial and ethnic populations of this state concerning access to high-quality oral health care, utilization of oral health care services, and oral health status;
- * Develop recommendations for the most effective means of providing outreach to communities throughout the state to ensure their maximum participation in publiclyfunded oral health programs;
- * Seek to establish a statewide alliance with community-based agencies and organizations, health care facilities, oral health care provider organizations, and dental insurance companies to promote the objectives of the center;
- * Evaluate oral health programs in other states to assess their efficacy and potential for replication in this state, and make recommendations regarding the adoption of such programs, as appropriate; and;
- * Report to the Governor and Legislature annually on the work of the center and the status of oral health in the State.

The bill's Assembly sponsor, Valerie Huttle, went on the record to say, "This would be an extensive effort to promote oral health throughout our state." "Oral health is a window to our overall health, so let's work together to make this a major step toward a healthier New Jersey."

If it was enacted, New Jersey would have become the 39th state with a similar office of oral health and, it would have reestablished that a dentist was the designated dental director in New Jersey. However, New Jersey would have become the first state to create such an entity in a dental school. This was a creative approach that could have enabled this entity to be developed with minimal economic impact to the state.

Unfortunately, Governor Christie Absolute Vetoed the legislation citing concerns about the future of UMDNJ – The State Dental School. However, he did laud the merits of the legislation and felt that it was good public policy to have an office of oral health in New Jersey.

- \$.2035, sponsored by Senators Ron Rice (D-Essex) and Joe Vitale (D-Middlesex), provides a gross income tax deduction for the first \$200,000 earned by certain new dentists and physicians in their first seven taxable years of practice in New Jersey. This equates to a \$16,000 gross income tax savings per new licensee. The bill does limit the dentists who are eligible for the deduction to those practicing as general dentists or pedodontists.

Recently, the Senate Health Committee unanimously passed the legislation. It is now before the Senate Budget and Appropriations Committee for further consideration.

The purpose of this bill is to encourage new dentists and physicians to begin their career and root in New Jersey so as to prevent shortages of dentists or physicians in the State and to ultimately realize the economic and healthcare benefits associated with the establishment of new dental and medical practices in our communities.

College loan debt and repayment top is a top issue among the NJDA's newly practicing dentists. This legislation is an out-of-the-box attempt to assist those dentists with the financial challenges associated with new licensure. No state East of the Mississippi has a program similar to this. And, no state in the nation seeks to assist young dentists in this way. Elsewhere, it is limited to physicians.

- S.2218, sponsored by Senator Loretta Weinberg, which clarifies who can administer and monitor of general or regional anesthesia in hospitals and ambulatory surgical centers, has stalled because of concerns among some of the Senate Health Committee members.

The legislation was instigated by the NJ Society of Anesthesiologists as a reprisal to the New Jersey Department of Health and Senior Services proposed new regulations that would remove the physician supervision, which is currently required, for anesthesia delivered in a hospital setting.

New Jersey has proudly been recognized as having the nation's strongest anesthesia regulations and our patient safety is unmatched. Fortunately, properly trained dentists also enjoy the right to administer anesthesia in hospital and ambulatory surgical centers independent of anesthesiologists.

Recently, the Board of Nursing changed the title of a certified registered nurse anesthetist (CRNA) to an Advanced Practice Nurse (APN). That title change has prompted the CRNA/APN community to lobby the DHSS to change the hospital licensing standard regulations to permit independent practice by a CRNA/APN to deliver anesthesia. If these regulations are adopted, a nurse can deliver anesthesia without a physician being present.

The anesthesiologists, the NJDA and the NJSOMS are concerned about this possible change too.

S.2218, however, as drafted, inadvertently omitted properly trained dentists from being able to administer anesthesia. Fortunately, the NJDA has worked with the bill sponsor and the Society to secure amendments to the legislation that would reinstate dentistry current privilege.

- A.3000/S.3000 - FY2010/2011 Budget, the State of New Jersey eliminated a separate budget line item under Medicaid for pediatric orthodontic services as a projected cost-savings measure of nearly \$4 million. However, the state did not eliminate the orthodontic benefit. Instead, it imposed a new stricter scoring standard for patients to qualify. New Jersey believed that with a stricter standard it imposed fewer cases would be approved thereby being able to be covered by

the existing capitated fee given to the Medicaid HMOs for dental procedures. The insurers disagreed.

As a result, Medicaid orthodontic services have virtually ceased in NJ, which is contrary to the state's initial reduction charge. The NJDA DGA has worked closely with its orthodontist members and the NJ Medicaid Office to ensure that the Medicaid HMOs actually cover the services required by the state. After a year of work, it is now beginning to pay off. Indications are such that the insurers are starting to approve cases for orthodontic services.

But we're not done. The NJDA DGA is working closely with Medicaid Division to reinstate the lost funds back into the state budget and trying to have mid-year budget revision to assist in covering these services.

- A.4185, sponsored by Assemblywomen Annette Quijano and Grace Spencer, stipulates that a health care professional who places, or causes to be placed, an advertisement for that health care professional's services shall include in that advertisement the health care professional's name, State-granted professional license type, and highest level of academic degree.

Additionally, the bill requires health care professionals, who provide information regarding health care services on an Internet website that is directly controlled or administered by that health care professional or that health care professional's office personnel, to prominently display on that Internet website their name, type of license and highest level of academic degree.

The NJDA expressed concerns about the legislation as it may conflict with standards already set in place by the NJ State Board of Dentistry. The NJDA was able to halt the legislation from further action by the Legislature in order to prepare favorable amendments that would not change the current advertizing practices for NJ licensed dentists.

- A.3378/S.2583, sponsored by Assemblyman Gary Schaer and Senator Joe Vitale, which is designated the "Healthcare Transparency and Disclosure Act," makes various changes to the administration of health benefits plans, regarding: (1) out-of-network payment collection responsibilities by physicians and health care facilities under insured and self-funded health benefits plans; (2) certain consumer disclosures by physicians, health care facilities and health plan providers; and (3) eligibility for participation in health insurance plan networks.

The bill requires physicians and health care facilities delivering out-of-network services to make a good faith and timely effort to collect each covered person's liability, including any deductible, copayment, or coinsurance owed by the covered person to the physician or health care facility pursuant to the terms of the covered person's health benefits plan. The bill provides that a good faith and timely effort to collect means three good faith attempts to collect.

The bill also requires the physician and facilities to retain and make available for inspection by the Department of Banking and Insurance, all records relating to any attempt to collect a covered person's liability for at least seven years following the date on which the record is made.

The bill provides, however, that a physician or facility delivering out of network services may waive a covered person's financial responsibility if: (1) the physician or facility determines that the covered person has a medical or financial hardship; and (2) such waivers are not granted

routinely or excessively. Under the bill, a medical hardship means that the covered person is unable to make payment due to a medical condition, physical or behavioral, that has left the covered person unable to make payment, or direct that payment be made, or has left the covered person unable to comprehend that payment is required.

The bill requires the physician or facility to notify the carrier or the entity providing a self-funded health benefits plan whenever the physician or facility waives a covered person's financial responsibility and retain any records relating to such a decision in the patient's record. The bill allows a carrier or entity providing a self-funded health benefits plan, if the carrier or entity determines that a physician or facility has committed a pattern of violations of section 3 of the bill concerning waivers of payment by a covered person, to exempt the physician or facility from the provision of law which gives an out-of-network health care provider the right to receive payment for reimbursement directly through an assignment of benefits. Under the bill, the carrier or entity is required to notify the physician or facility 30 days in advance of exempting the physician or facility and the exemption is not permitted to exceed a period of one year from the date of the notification. The bill further provides that a determination imposing the exemption may not be made until six months after the effective date of this bill.

This bill requires providers of health benefits plans to establish and maintain a website to serve as an information clearinghouse for covered persons to obtain information to assist them in their health care needs. A link to the website must be featured and prominently displayed on the back of each health benefits card issued to covered persons to ensure that they are aware of the website. Specifically, the bill requires the websites to have: (1) links to quality rankings that are produced, audited, and publicly reported by State and federal agencies for physicians, which rankings shall be provided in a manner to be prescribed by the Department of Banking and Insurance, in consultation with the State Board of Medical Examiners, the Division of Consumer Affairs, and the Department of Health and Senior Services; (2) for each health benefits plan offered in this State, a clear and understandable description of the plan's out-of-network health care benefits, including a covered person's financial responsibility for those benefits; and (3) any other information that the Department of Banking and Insurance determines is appropriate and necessary to ensure that covered persons receive sufficient information needed to make well-informed health care decisions. The bill also prescribes a minimum font size and location for each link featuring the information prescribed.

This bill requires physicians and health care facilities, when scheduling an appointment with a covered person, to disclose whether the health care services are in-network or out-of-network with respect to that person's health benefits plan and that there may be a financial responsibility of the covered person, including applicable deductibles, copayments and coinsurance. The bill also requires the facility or physician, if providing out-of-network services, to provide to the covered person, in a clear and understandable manner and in the terms the covered person typically understands, the following: (1) a description of the procedure; (2) an estimate of the costs charged by the physician or facility for those services; and (3) a notice to contact their insurance carrier for further consultation on the costs of the procedure.

The NJDA worked tirelessly with the sponsor of the legislation to ensure minimal impact on dentistry with this legislation. The chronic education of legislators that "dental is different" was imperative during this massive insurance disclosure and oversight reform. Ultimately, the NJDA and its coalition partners halted the advancement of this legislation to ensure no net negative impact on dentistry.

- A.201, sponsored by Assemblyman Ralph Caputo, directs the Director of the Division of Consumer Affairs, in consultation with the New Jersey State Board of Dentistry and the Commissioner of Health and Senior Services, to develop an informational brochure that explains the potential advantages and disadvantages of using dental amalgam in dental procedures.

The bill also requires that the brochure explains what alternatives are available to dental amalgam and what potential advantages and disadvantages are posed by the use of those alternatives. In addition, the director is to include such information that the division feels will contribute to a patient's ability to make an informed decision, including, but not limited to, comparative information on the durability, cost, aesthetic quality, or other characteristics of the dental amalgam and the alternative materials available.

This bill also requires dentists licensed pursuant to provide a copy of the informational brochure to each patient undergoing a filling procedure, and to offer to each patient undergoing a filling procedure the option of choosing dental amalgam or a composite alternative, when appropriate.

The NJDA is firmly opposed to this anti-amalgamist legislation and has successfully halted its advancement for the past 4 years. We will remain vigilant in doing so in future legislative sessions should the need arise.

- A.1082, sponsored by Assemblyman Reed Gusciora, John Wisnewski, Vincent Prieto, would require coverage for dental composite restorations at the basic service percentage level of the usual, customary and reasonable fee under dental service corporation and dental plan organization contracts approved for issuance or renewal in this State by the Commissioner of Banking and Insurance.

The same coverage would be required under all health benefits plans providing dental expense benefits issued by health insurance carriers, such as health service corporations, individual and group health insurers, health maintenance organizations and the State Health Benefits Plan. It would also require the same coverage under the medical expense benefits portion of basic and standard private passenger automobile insurance policies, and, finally, under contracts for health care services under the Medicaid and NJ FamilyCare Programs and the fee-for-service Medicaid program.

This NJDA supported legislation is designed to bring parity to restorative alternatives. It is opposed by the insurers.

- A.2237, sponsored by Assemblymen John McKeon and Alberto Coutinho, makes a supplemental appropriation of \$30,000,000 to the University of Medicine and Dentistry of New Jersey to fund the expansion and renovation of clinical facilities at the New Jersey Dental School.

The NJDA supports this legislation to improve the clinical facilities of the State's Dental School.

-A.2346/S.2215, sponsored by Assemblyman John McKeon and Senator Loretta Weinberg, would require that every dental patient in New Jersey receives prior notification if a dental prosthetic device or appliance that the patient's dentist proposes to use on that patient was manufactured in a foreign jurisdiction.

The sponsors felt the initial need for this bill was predicated on reported evidence from media investigations that indicate a disturbing number of instances in which lead-tainted bridges, crowns, and fillings from foreign countries have been imported into the United States.

The bill provides specifically as follows:

- · A dentist, prior to providing to a patient a prosthesis that was manufactured outside the United States, must notify the patient in writing, on a form and in a manner prescribed by the State Board of Dentistry, that the prosthesis was so manufactured, and obtain written consent from the patient to the use of the prosthesis.
- · The form is to contain a statement that the patient understands the prosthesis to be manufactured outside the United States and either agrees to its use or disagrees and requests the use of a prosthesis manufactured in the United States by indicating his preference and signing the form.
- · The bill defines "prosthesis" to mean a fixed or removable dental prosthetic device or appliance, whether fabricated in whole or in part and used for functional or cosmetic reasons or both, including, but not limited to, a complete or partial denture, veneer, inlay, onlay, crown, or bridge.
- · A dentist will be liable to a penalty as provided in R.S.45:6-13 for a violation of this bill or any regulations adopted pursuant thereto (\$300 for a first offense and \$2,000 for a second and each subsequent offense unless otherwise specifically provided).

The NJDA voiced opposition to this legislation and has educated both the Assemblyman and the Senator on the matter. The bill is being advanced aggressively by the domestic laboratory community as a protectionist measure against the usage of foreign labs, which are regulated by the USDA and the FDA under the medical device act. Senator Weinberg, after listening to the NJDA's position withdrew the legislation from the Legislature. The NJDA is extremely appreciative.

- A.464, sponsored by Assemblywoman Joan Voss and Assemblyman Pat Diegnan, would increase the membership of the New Jersey State Board of Dentistry from 13 to 15 members by including on the board an additional dental hygienist and a dental assistant. Under current law, the New Jersey State Board of Dentistry is comprised of thirteen members as follows: nine licensed practitioners; one dental hygienist; and two public members and one State executive department member who are appointed by the Governor.

The bill also provides that a quorum of the board shall consist of eight members, rather than five members as is currently provided by law.

The NJDA is opposed to this legislation seeing it as needless. Licensed dentists are better able to determine competency of general dentists and specialists as well as hygienists and assistants than dental hygienists.

- S.1742, sponsored Senators Nia Gill and Joe Vitale, requires health care providers, under managed care plans that provide for both in-network and out-of-network benefits, to give written notice to covered persons whenever that provider refers the covered person to any out-of-network provider.

The written notice by the health care provider to the covered person for the out-of-network referral shall include: (1) a disclosure explaining the financial responsibility of the covered person concerning any applicable deductibles, copayments, and coinsurance for the receipt of out-of-network health care services, and include a comparison with the covered person's financial

responsibility for receipt of services in-network; and (2) a list of in-network health care providers, if any, that are available to the covered person within a reasonable geographic area that provide the same health care service or range of services as the out-of-network provider to which the provider is referring the covered person.

This written notice requirement as to out-of-network providers shall not apply to health care providers when providing services to covered persons under a point-of-service plan, as set forth under section 10 of P.L.1997, c.192 (C.26:2S-10), as a point-of-service plan does not require any form of referral or prior authorization in order for a covered person to access an out-of-network provider.

The NJDA is staunchly opposed to this legislation and sees it as unreasonable and impractical.

- S.1743/A.2511, sponsored by Senators Nia Gill and Joe Vitale and Assemblymen Gary Schaer and Louis Greenwald, establishes that a waiver, rebate or payment of an insured's deductible, copayment, or coinsurance by a health care practitioner, owed by a covered person pursuant to the terms of an insurance policy between that person and an insurance company, shall be considered a form of insurance fraud. The bill amends several sections of the State's Criminal Code concerning "health care claims fraud" and "insurance fraud," as well as the "New Jersey Insurance Fraud Prevention Act," in order to accomplish its objectives.

First, the bill establishes that a health care practitioner is guilty of a crime of the fourth degree involving health care claims fraud if that practitioner, directly or indirectly related to a claim, knowingly waives, rebates, gives, pays, or offers to waive, rebate, give or pay all or part of the deductible, copayment, or coinsurance owed by a covered person pursuant to the terms of an insurance policy between the covered person and that person's insurance company. A crime of the fourth degree is punishable by a term of imprisonment of up to 18 months, a fine of up to \$10,000, or both.

The bill also incorporates this form of fourth degree health care claims fraud within the relevant provisions of the Criminal Code which describe the broader crime of "insurance fraud," set forth in section 73 of P.L.2003, c.89.

In addition to the above described term of imprisonment and fine, the commission of the fourth degree crime of health care claims fraud may result in an order by the court or an appropriate licensing agency, which suspends the guilty health care practitioner's license or certificate for a period of not more than one year, and bars the practitioner from the practice of the profession during that time.

Second, under the "New Jersey Insurance Fraud Prevention Act," the bill establishes that a health care practitioner violates that act if the practitioner, directly or indirectly related to a claim, waives, rebates, gives, pays, or offers to waive, rebate, give or pay all or part of the deductible, copayment, or coinsurance owed by a covered person. In accordance with that act, a violation may subject the health care practitioner to an administrative proceeding before the Commissioner of Banking and Insurance, with a penalty of between \$5,000 and \$15,000, plus restitution to any insurance company that suffered losses due to the violation, or a civil action in court with the same range of monetary penalties, plus payment of court costs and reasonable attorneys' fees to the commissioner.

Further, violations of the "New Jersey Insurance Fraud Prevention Act" may result in a recommendation to the appropriate licensing agency with respect to a potential suspension or revocation of the health care practitioner's license or certification. See P.L.1998, c.21, s.41.

The NJDA is fully opposed to this legislation as it is not practical and does not have merit.

ON THE NATIONAL LEVEL

Red Flags Rule

The United States Congress passed S. 3987, exempting certain businesses, including dental practices, from the Federal Trade Commission's (FTC) Red Flags Rule. President Obama signed this bill into law.

Our collective efforts in writing lawmakers and lobbying Capitol Hill on ADA's behalf have paid off. The collective voice of dentistry was heard loud and clear: tens of thousands of ADA's grassroots dentists who took action helped get the Red Flags legislation through Congress.

This law may save your practice hundreds of dollars in implementation costs annually to review and understand the identity theft rules and train your staff on compliance. In fact, the ADA estimates the nationwide savings associated with this exemption to be \$72 million for dental offices alone.

New Jersey was at the forefront of this legislative initiative as we helped secure former Congressman, the late John Adler (D-NJ), to be the ADA's legislative champion on this subject.

Congressman Adler reportedly died of an infection generated by a routine dental cleaning. He was a heart patient (valve replacement) and he had not reportedly taken any antibiotics prior to his dental visit. Congressman Adler's steadfast stewardship of this legislation and his support in protecting much of dentistry from the onslaught of this onerous regulation is deeply appreciated and his friendship and counsel are sorely missed by his friends in organized dentistry.

The McCarran-Ferguson Act

The McCarran-Ferguson Act adversely affects the public by exempting insurers from some federal antitrust laws. H.R. 4626, the "Health Insurance Industry Fair Competition Act," would repeal this unfair exemption. On February 24, the U.S. House of Representatives agreed, and overwhelmingly passed H.R. 4626 by a vote of 406-19. We urge the Senate to move quickly to pass H.R. 4626 this year. Today, virtually all policymakers recognize the need to curtail the rising cost of health care coverage and to furnish consumers with more coverage options. Passage of H.R. 4626 could help encourage competition in the insurance marketplace by fostering greater antitrust enforcement against the insurance industry by the Federal Trade Commission (FTC) and the Justice Department in instances where state regulators fail to act. When insurance competitors are permitted to work jointly, consumers are less likely to see as much innovation and variety in the marketplace as they would in an atmosphere of robust competition.

H.R. 4626 would bring the insurance industry into line with other American businesses by eliminating the special treatment granted to insurance institutions almost 65 years ago with passage of the McCarran-Ferguson law.

The Dental Coverage Value and Transparency Act

The American Dental Association (ADA) urges you to cosponsor the Dental Coverage Value and Transparency Act introduced by Rep. Robert Andrews (D-N.J.). Dental coverage helps 173 million Americans get the dental care that is vital to ensuring good oral and overall health. This bill would help consumers receive the full value of their dental coverage, ensure transparency and improve health plan efficiency. Unfair practices have crept into the common policies of dental benefit plans. They hinder patients' ability to receive the full benefits for which they pay and create unnecessary administrative burdens on health care providers. The only redress is legislative action. The bill requires that all health plans that offer dental benefits will, among other provisions:

- be prohibited from dictating fees for procedures that the plan does not cover. This marketing ploy, which purports to save consumers money, only shifts costs to other patients.
- provide uniform coordination of benefits. When a consumer is covered by more than one plan, the secondary payer should be responsible for paying the remainder of the claim (up to, but not exceeding, 100 percent of the amount of the claim).
- permit consumers to designate payment of dental benefits to a provider who is not participating in the network, so that the patient does not have to pay for covered services out-of-pocket and wait to be reimbursed by the plan.
- assure that consumers receive the full value of their coverage by requiring plans to provide the same dollar amount of coverage for a given procedure regardless of whether the provider of the procedure participates in the network.
- be prohibited from systematically combining distinct dental procedure codes in a manner that results in a reduced benefit under the plan ("bundling of procedures").
- be prohibited from changing a benefit code to a less complex (lower cost) procedure if such actions are inconsistent with the dental code (CDT) or the terms of the network agreement.

Passing this legislation would provide a more transparent, honest, and equitable system for patients and their dentists.

So now you have 20 reasons for supporting your PAC. If you need more please feel free to call Jim Schulz or myself as this is only the tip of the iceberg. It is a continuous up hill battle that must be fought to maintain control of our profession and practices. Actions taken by the government and insurance companies force us to remain vigilant. To our

advantage NJDPAC has always been proactive rather than reactive. We have approached our legislators in a very diplomatic fashion thus providing for constructive relationships. We have an administrative staff that is second to none and a lobbyist who is well respected in Trenton and nationally.

As we go forward the number of challenges we face grow daily. Without the support of our members, the Dental Profession will falter. This past year fewer than 30% of our members contributed to PAC. Now is the time to step up and be heard. We need participation that approaches 100%. PAC enables us to protect our profession and the patients that we treat; it allows us to maintain our practices as successful businesses; and it provides us with the ability to care for our families at a rewarding level.

Mark A. Vitale, DMD MCDS Trustee Assistant Chair NJDPAC