Close of the 78th Oregon Legislature

Also Inside
ODA House of Delegates preview, page 23
ICD Compliance, page 26

Another successful session for the ODA
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Membership Matters

Volume 21, Issue 3

Membership Matters is an official publication of the Oregon Dental Association in support of its core purpose to advance the dental profession and promote the highest standard of oral health and oral health care.

Membership Matters
Editor: Barry J. Taylor, DMD, FAGD, CDE
barrytaylor1016@gmail.com

Publications Advisory Committee:
Kurt L. Ferré, DDS; Thomas J. Hilton, DMD, MS; Mehdi Salari, DMD

ODA Staff Liaison:
Christina Swartz Bodamer

Graphic Design: Heather White, LLM Publications, Inc.


Oregon Dental Association
PO Box 3710, Wilsonville, OR 97070-3710
503-218-2010 • 800-452-5628
www.oregondental.org
info@oregondental.org

Executive Director: Conor P. McNulty, CAE,
cmcnutley@oregondental.org

Dentist Health & Wellness Hotline:
Support for a dentist in crisis, regardless of membership status: 503-550-0190

Oregon governor, Kate Brown signs bills into law at the end of the 2015 Legislative Session. Learn more about how ODA fought for you, your practice, and your patients in this year’s session.

ICD-10 compliance enforcement begins October 1. What you need to know.

ODA House of Delegates is almost here. Meet the candidates and learn about this year’s agenda.

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Oregon Dental Association
@ODAprez
Oregon Dental Association (private group)
www.TheToothOfTheMatter.org
I was sitting on the deck, enjoying the warmth of the sun at our family’s beach cabin overlooking Puget Sound. Among my random thoughts, I was wondering why our beach neighbor down the road, Norm Pope, DMD, had wanted to speak with me.

(Sidenote: Every time I visit Norm, I feel a sense of guilt. One time, when I was about 14 years old, I took our small outboard motor boat to visit him, about three miles downshore. The problem is, that about one mile into the trip, the engine ran out of gas. The guilt comes in because—for reasons I don’t recall—Norm was the one who ended up helping me get the boat back to our cabin. He actually ended up walking on the beach, awkwardly dragging the boat in the water for two miles!)

So, ensuring that I had a full tank of gas, I drove to his cabin to visit him and his wonderful wife, Carolyn. The reason Norm wanted to talk was that he was organizing his dental school class’s 60-year reunion. But he was missing contact information for a half dozen classmates and he wanted my help finding them. I realized that by helping Norm, I could rid myself of that 35-year-old guilt hanging over my head. It was also an opportunity to reflect back on a snapshot of time in the dental profession when some significant changes were occurring.

The Class of 1956 was the last class to graduate from the Dental School building that was located at NE 6th Avenue and Oregon. In June of 1956, the “new” dental school—which we now call the “old” school—opened on the University of Oregon Marquam Hill campus, thus joining the medical school and nursing school for what would become OHSU. The new school had been built in one year; the Oregon Dental Association had lobbied the state of Oregon for the need to build a new school quickly so that it would not lose their accreditation. In April of 1955 $2.2 million was appropriated, and the new school opened in June the following year. Things happened faster 60 years ago.

If you have any information about Norm’s classmates from the Class of 1956, he would greatly appreciate if you could call him at 503-426-8933.

You can also forward me the information and I will be sure to get it to him.

Norm is looking for the following classmates:

- Dr. William Davidson
- Dr. Merle Dennis
- Dr. Robert Dow
- Dr. Leroy Goodwin
- Dr. Joseph Mecale
- Dr. Robert Stansbuy
- Dr. Robert White

The Class of 1956 was going into a profession which was still 100% cash basis. One of the first dental insurance companies in the nation had just been founded in 1955 by the ODA in response to a direct request by the Longshoreman’s Union to provide dental care to union members’ children. In the 1970s, this class would see a significant growth in the role of dental insurance in their practice when employees of the Portland Public School District and later State of Oregon would become insured.

Reading through past issues of the Oregon Journal (forerunner to Membership Matters), one sees that in some manners the issues haven’t changed. Stories were written about “The Dentist and Malpractice” and “Water Fluoridation.” Other stories, “Manpower Shortage” do seem dated. Still others, “Chlor-Trimeton in the prevention of Edema,” motivated me to search online for explanation. Other titles, “The Impact of Group Dental Health Care Programs on Dental Society Activities,” seemed like they could appear in a 2015 issue of Membership Matters.

Sixty years from now, perhaps a similar story will be told, with some variation.

The opinions expressed in this editorial are solely the author’s own, and do not reflect the views of the Oregon Dental Association or its affiliated organizations.
Quality of service & craftsmanship: Steve, you are amazing!
Crowning created my minimal efforts, perfect
equation! Contact was spot on.

Thanks again!
**Events & Education**

Events are subject to change. Please consult the sponsoring group to confirm details.
To add your component’s continuing education event, please email bendsalari@gmail.com.
Please send all other events to Cassie, cleone@oregondental.org.

**August 2015**

**Oregon Board of Dentistry Meeting:**

**Oregon Board of Dentistry Meeting:**

**September 2015**

**ODA New Dentist Think Tank:**

**Continuing Ed., 1.5 Hrs:**
- “Hospital Dentistry,” Presented by Dr. Patrick Haggerty. Tues, Sept 8, Boys & Girls Club, Salem. Info: www.wacountydental.org

**ODA House of Delegates:**
- Sep 11–12, Riverhouse Hotel, Bend. Info: 503-218-2010.

**DFO Event:**
- “Texas Hold ‘Em Poker.” Sat, Sept 12, Riverhouse Hotel, Bend. Info: 503-594-0880

**Continuing Ed., 1.5 Hrs:**

**Continuing Ed., 2 Hrs:**

**October 2015**

**Continuing Ed., 6 Hrs:**

**Continuing Ed., 1.5 Hrs:**
- “Infection Control: Bacteria in the water line,” Presented by Steven King, PhD. Tues, Oct 13, Roth’s, West Salem. Info: www.mpdentalce.com

**Continuing Ed., 1.5 Hrs:**

**DBIC Risk Management:**
- Southern Willamette Dental Society. Fri, Oct 16, Corvallis. Info: Dr. Mark Swensen, 541-754-4017

**November 2015**

**Continuing Ed., 1.5 Hrs:**
- “Public Health Dentistry,” Presented by Bruce W. Austin, DMD. Tues, Nov 10, Roth’s, West Salem. Info: www.mpdentalce.com

**ODA Board of Trustees Meeting:**

**Oregon Board of Dentistry Meeting:**

**December 2015**

**DBIC Risk Management:**
- Marion & Polk Dental Society. Fri, Dec 4, Roth’s, West Salem. Info: Sabrina Hance, 503-581-9353

**Continuing Ed., 2 Hrs:**

**Oregon Board of Dentistry Meeting:**
- Fri, Dec 18, 1500 SW 1st Ave, 7th Floor Conf. Room, Portland. Info: 971-673-3200.

**January 2016**

**ODA Board of Trustees Meeting:**

**Continuing Ed., 1.5 Hrs:**
- “Pediatric Dentistry,” Presented by Hai Pham, DMD. Tues, Jan 12, Roth’s, West Salem. Info: www.mpdentalce.com

**Continuing Ed., 1.5 Hrs:**

**ODC Speaker Host Training:**

**Continuing Ed., 2 Hrs:**

**February 2016**

**Continuing Ed., 6 Hrs:**

**Continuing Ed., 1.5 Hrs:**
- “Cardiology & Dentistry,” Presented by Priya Kansal, MD. Tues, Feb 9, Roth’s, West Salem. Info: www.mpdentalce.com

**Continuing Ed., 1.5 Hrs:**

**March 2016**

**ODA Board of Trustees Meeting:**

**Continuing Ed., 1.5 Hrs:**
- “Measure 91 and the Workplace,” Presented by Randall Sutton or David Briggs. Tues, March 8, Roth’s, West Salem. Info: www.mpdentalce.com

**Continuing Ed., 1.5 Hrs:**

Find this calendar online at www.oregondental.org. Click 'Calendar' at the top of the home page.
The leadership positions detailed below are currently open for nominations. All ODA members are encouraged to participate in the leadership of this organization. For more information about any of these positions, please call 503-218-2010 or email cleone@oregondental.org.

Nominations are currently open for:

**ODA Trustee**
- **Term:** Four years
- **Elected:** Sept. 12, 2015, by ODA House of Delegates
- **Positions Open:** Two
- **Incumbents:** Matthew C. Biermann, DMD, MS; Steven E. Timm, DMD
- **Declared Candidates:** Matthew C. Biermann, DMD, MS; Bradley W. Hester, DMD

**ADA Delegate At Large**
- **Term:** Three years
- **Elected:** Sept. 12, 2015, by ODA House of Delegates
- **Positions Open:** One
- **Incumbents:** Karley R. Schneider, DMD
- **Declared Candidates:** Karley R. Schneider, DMD

**Leadership Development Committee**
- **Term:** Three years
- **Elected:** Sept. 12, 2015, by ODA House of Delegates
- **Positions Open:** Four
- **Incumbents:** Patrick M. Nearing, DMD; Kimberly R. Wright, DMD
- **Declared Candidates:** Patrick M. Nearing, DMD

**Dental Foundation of Oregon Board of Directors**
- **Term:** Four years
- **Elected:** Oct. 30, 2015 by ODA Board of Trustees
- **Positions Open:** Two
- **Incumbents:** Janet P. Peterson, DMD, PhD; Thomas D. Pollard, DMD

**Moda, Inc., Board of Directors**
- **Term:** Four years
- **Elected:** Oct. 30, 2015 by ODA Board of Trustees
- **“Deadline to submit materials: Sept. 15, 2015**
- **Positions Open:** One dental director; Two non-dental directors
- **Incumbents:** Mark E. Jensen, DMD
- **Declared Candidates:** open

Interested applicants should submit a letter of interest and a one-page resume, by the deadlines listed for each position. Send materials by U.S. Mail or email:

**Mail:** ODA Leadership Development Committee
Jim Smith, DMD, Chair, Nominating Sub-Committee
PO Box 3710, Wilsonville, OR 97070

**Email:** leadership@oregondental.org

---

**ODA Trustees**
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drsteventimm@yahoo.com

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drjonyoung@gmail.com

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fbremner@comcast.net

**ADA DELEGATES AT LARGE**
Karley R. Bedford, DMD, Multnomah
Hai T. Pham, DMD, Washington County

**ASDA REPRESENTATIVE**
Ericka Smith, DS3

**NON-VOTING MEMBERS**
Jeffery C. B. Stewart, DDS, MS, Multnomah, Speaker of the House
Barry J. Taylor, DMD, CDE, Multnomah, Editor
OrMOM registration is now open!

Visit www.oregondental.org to register your team to volunteer at this year’s clinic, November 22–24, at the Oregon Convention Center in Portland.

If you are interested in donating to OrMOM, please call 503-218-2010.
Welcome new ODA members!

Maryam N. Aghchay, DDS • Bend
Central Oregon Dental Society

Tyler L. Clark, DDS • Eugene
Lane County Dental Society

Francis J. Haik, DMD • Eugene
Lane County Dental Society

Ngan N. Hoang, DMD • Beaverton
Washington County Dental Society

Julia A. Javarone, DDS • Grants Pass
Rogue Valley Dental Society

Ron Kazemi, DDS • Eugene
Lane County Dental Society

Aaron C. Lau, DMD • Eugene
Lane County Dental Society

Roland G. Lee, DMD • Eugene
Lane County Dental Society

Thomas S. Lloyd, DDS • Medford
Southern Oregon Dental Society

Michael P. Malmquist, DMD • Portland
Washington County Dental Society

Blaine E. Mowrey, DMD • Portland
Washington County Dental Society

Theron L. Nebeker, DMD • Salem
Marion and Polk Dental Society

Anna T. Nguyen, DMD • Corvallis
Southern Willamette Dental Society

Trevor R. Peterson, DMD • Medford
Southern Oregon Dental Society

Hieu Pham, DMD • Portland
Multnomah Dental Society

Benjamin E. Saikin, DMD • Springfield
Lane County Dental Society

Samuel D. Seo, DMD • Tigard
Washington County Dental Society

Ryan H. Shurtz, DDS • Salem
Marion and Polk Dental Society

Igor A. Sitnik, DMD • Portland
Multnomah Dental Society

Luisa M. Snyder, DMD • Corvallis
Southern Willamette Dental Society

Nathan Snyder, DMD • Philomath
Southern Willamette Dental Society

Christopher A. Swisher, DDS • Hood River
Mid-Columbia Dental Society

Leonard B. Wilson, DMD • Roseburg
Umpqua Dental Society

Join the Molar Movement
#FightEnamelCruelty

Post your photos to Facebook or Twitter and tag the ODA, and you may be featured in a future Membership Matters!

For more information, or to email your photo to us, contact ODA Membership Specialist Kristen Andrews at 503-218-2010 x110 or kandrews@oregondental.org.

oda.png

A: ODA President Steven Timm, DMD (2nd from left), visits Marion & Polk Dental Society board and volunteers: Frank Allen, DMD, Chris Finlayson, DMD, Will Trevor, DDS, Bart Carter, DMD, MS, Jennifer Frankel, DMD, Selma Moon Price, DDS and Marion & Polk Dental Society administrative secretary, Sabrina Hance.
OHSU School of Dentistry Graduation

Graduate candidates recite the Dental Profession Pledge as part of the OHSU School of Dentistry graduation ceremony.

Dean Marucha addresses the audience at the 2015 Hooding ceremony, Friday June 5th.

Need HELP? Facing ADDICTION or CRISIS?

Please contact the Dentist Health & Wellness Hotline.

ODA volunteers are on call, 24 hours a day to provide confidential, caring assistance for help in dealing with substance abuse and addiction, disability, litigation stress, and mental health challenges. ODA member dentists recognize the essential human dignity of all those who suffer from chemical dependency or mental disorders.

Our services are available to all Oregon dentists and OHSU dental students in need of help, regardless of their affiliation with the ODA.

24-hour support: 503.550.0190

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DBC now providing disability insurance through Ameritas

To learn more, please call DBC at 503-952-5271 or email shelley.campbell@dbicins.com

In the June/July issue, Membership Matters highlighted ODA’s new endorsement of WEO Media, a full-service dental marketing agency.

Find this information online at: http://bit.ly/ODAbenefits

If you missed it, find it online at www.oregondental.org, click “Read Membership Matters” on the left side of the homepage or get the ODA App from the Apple Store or Google Play.

The Dentists Benefits Corporation is always looking for ways to enhance the benefits to the members of the Oregon Dental Association. DBC is pleased to announce that they recently negotiated an exclusive 15% discount on individual disability insurance plans through their partner, Ameritas.

Ameritas and its brand of companies have been selling individual disability insurance since 1966. They are a leading provider of disability insurance with dentists. These plans will pay benefits if you are totally disabled in your occupation as a dentist or dental specialist, even if you choose to work in another occupation.

For those with practice ownership, they also offer Business Overhead Disability Insurance that has many of the key contractual features that are a part of their individual disability insurance policy. This gives you the option to have a disability insurance plan that can protect any bank loans related to your practice.

The 15% discount is only available to members of the Oregon Dental Association through Dentists Benefits Corporation. Please contact Dentists Benefits Corporation at 503.952.5271 or email shelley.campbell@dbicins.com for more information.

Call DBC for more information on this exclusive 15% discount on individual disability insurance plans!

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OSHA Hazard Labels and Safety Data Sheets

What is the new requirement for OSHA Hazard Communication labels?

Starting June 1, 2015, dental offices are required to implement the revised “International Labeling System” for hazard communications. The new labels contain pictograms, signal words, hazard and precautionary statements, product identifiers and supplier identification to keep staff safe with an easier to understand format. Your practice’s chemical manufacturers are required to provide you with a label for their products that includes the new system taxonomy.

Along with the new labeling classification, “Safety Data Sheets” (previously known as MSDS) have changed. The Hazard Communication Standard requires additional staff training when new chemicals or newly recognized chemical hazards are incorporated into a workplace.
THE STRENGTH TO HEAL while gaining experience and a renewed sense of pride.

There isn’t a more rewarding place to practice dentistry than the Army or Army Reserve. You’ll find patient diversity, state-of-the-art technology and facilities, and challenges you’ll find nowhere else. And, when you’re part of the Army Reserve, you can practice in your community and serve when needed. Making a difference is a daily bonus.

To learn more visit healthcare.goarmy.com/h489 or call 360-891-4938.
On July 5th, just 5 days before they were Constitutionally required, Oregon’s 78th Legislative Assembly came to a close. It was a historical session, highlighted by the fact that Oregon had two different governors during this time: Governor Kitzhaber in the beginning, and Governor Brown in the end. Over 2,500 bills were introduced—not including budget bills—with a surprisingly larger number than expected of dental-related health care bills.

The ODA’s ability to work with House and Senate Health Care Committee members, as well as leadership in both chambers, put us in a rare place to not oppose any legislation. We needed to amend or change some bills, but in the end we did not testify in opposition to any single piece of legislation. This session, ODA was also happy to welcome Bruce Austin, DMD, our new state dental director, who will be working with the Oregon Health Authority on improving the oral health of our state. All in all, it was another successful session for the ODA. We look forward to the interim and starting to plan for the 2016 legislative session.
2015 End of Session Report

ODA Priority Legislative Agenda

SENATE BILL 672 Creation of a state dental director

ABOUT For the last 5 years, Oregon has been in the midst of an unprecedented transformation in our health care delivery system. Oral health has been recognized as a key component to overall health and fundamental part of the triple aim. Yet until February 2015, when the Oregon Health Authority hired a state dental director (Dr. Bruce Austin), dental care was being integrated into a greater health structure without the benefit of a dedicated presence and voice to influence policy.

Senate Bill 672 requires the Oregon Health Authority to appoint a dental director to oversee oral health programs in the state. This person will provide recommendations and guidance with a focus on underserved populations and make recommendations on improving the oral health of Oregonians.

ODA POSITION SUPPORT
RESULT The bill PASSED both the House and the Senate and was signed by Governor Brown.

SENATE BILL 302 Fixes the Dental Practice Act to allow dentists and dental hygienists the ability to prescribe within their scope

ABOUT Last year, an assistant attorney general issued a legal opinion that found the Oregon Dental Practice Act does not expressly authorize dental hygienists or dentists to prescribe drugs. Beginning in April 2014, the Oregon Board of Dentistry began removing the authority for dental hygienists to prescribe drugs in order to comply with the assistant attorney general’s opinion.

SB 302 simply modifies the definition of dental hygiene to include prescribing, dispensing and administering prescription drugs within the scope of their license. This does not expand scope of hygiene, but continues to allow them the ability to prescribe fluoride and antimicrobials. It also further clarifies the definition of dentistry to include prescribing, dispensing and administering prescription drugs.

ODA POSITION SUPPORT
RESULT There was no opposition to this legislation and it PASSED both the House and the Senate and was signed by Governor Brown.

HOUSE BILL 2972 Mandates oral health screenings for Oregon public school children when they turn 7 (or upon entering kindergarten)

ABOUT Early dental screening and timely treatment are fundamental to reducing the burden of childhood oral disease in Oregon, as well as improving the overall health for kids. Unfortunately, tooth decays is Oregon’s most common chronic childhood disease. Since schools already mandate screenings for vision and hearing, screening for oral disease is a logical extension of these essential health services.

House Bill 2972 requires students seven years of age or younger to receive a dental screening within 120 days of being enrolled in an educational program. The bill also states that the school shall provide to parents or guardians standardized information relating to dental care developed by the state dental director.

ODA POSITION SUPPORT
RESULT The bill PASSED both the House and the Senate and was signed by Governor Brown.

SENATE BILL 5507 Appropriates $160,000 from the Oregon Health Authority to the Dental Lifeline Network for donated dental services

ABOUT The Oregon Dental Association and Dental Lifeline Network (DLN) started the Donated Dental Services (DDS) program in 1988, through funding from the State of Oregon Mental Health Division, Office of Developmental Disabilities with an initial focus on adults with developmental disabilities. The state funding was eliminated in 2007-2008. Since then, the program has largely been funded by the national Dental Lifeline

The Oregon Dental Association is continuously watching for bills and regulatory action that could be harmful to the dental professional and the health of Oregonians, while constantly striving to work toward solutions for oral health issues.

The ODA is YOUR VOICE in Salem.
Network organization, and this funding is not sustainable.

SB 5507 mandates the Oregon Health Authority to contract with the Dental Lifeline Network, or other appropriate and qualified organization, for development and operation of a DDS program to benefit needy disabled, aged, and medically compromised individuals. For 2015–2017, the sum of $160,000 was appropriated from the general fund to the Authority.

**ODA POSITION** SUPPORT

**RESULT** The bill PASSED by the House and the Senate and was signed by Governor Brown.

---

**SENATE BILL 673** Permits licensed dentists to administer certain vaccinations

**ABOUT** Although dentists’ primary concern revolves around the diagnosis and treatment of oral diseases, the responsibility and role in the interaction of oral and systematic health is always present. Dentists take their role as primary care givers very seriously and are dedicated to keeping Oregonians healthy. The average patient visits their dentist more often than their primary care physician, making the dental office an ideal local to provide an additional opportunity for immunizations.

Senate Bill 673 would have allowed licensed dentists to administer immunizations after the Oregon Board of Dentistry adopted rules relating to the administration of immunizations by dentists. Although the bill did not pass this session it did create an opportunity to continue talking about the role that dentists play as primary care providers. Oregon remains a divisive state to talk about the appropriateness of vaccination mandates. This is unfortunate, given Oregon continues to have the nation’s lowest rate of childhood vaccinations.

**ODA POSITION** SUPPORT

**RESULT** The bill STALLED in committee.

---

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(Images of bank locations and contact information)
Other Legislation of Interest to Dentists

HOUSE BILL 2021  Creates a pilot program with Oregon Health Authority and Department of Education to provide oral health education, fluoride varnish and daily brushing and flossing for children

ABOUT  In the aftermath of the failed water fluoridation campaign in Portland, the City Club of Portland convened a task force to study and research alternatives to water fluoridation that would improve the oral health of Oregon’s children. The ultimate goal was to identify cost effective and practical solutions to improved oral health.

House Bill 2021 was a legislative concept that came out of that task force. The bill attempts to identify any potential barriers to those receiving fluoride varnish in a school-based setting. The pilot project will also allow data to be collected, as statewide infrastructure systems improve for tracking preventative services and outcome.

ODA POSITION  SUPPORT

RESULT  The bill passed out of the House Health Care Committee but STALLED in Joint Ways and Means.

HOUSE BILL 2683  Requires Oregon Board of Dentistry, upon request, to remove from its website and other publicly accessible print and electronic publications, information related to disciplined individual, if individual meets certain criteria.

ABOUT  In the past several legislative sessions, several members of the health care committees heard from dentists, doctors, nurses and others about the possible reputational damage caused by licensing boards. While the rationale for posting former disciplinary actions has been to inform the public, often times these postings serve more as a “scarlet letter” shaming a licensed professional. There is also evidence to suggest that the different licensing boards in Oregon (dentistry, medicine, nursing, etc.) follow different rules for discipline and posting of information.

House Bill 2683 states that if a licensee in good standing wishes to petition to remove a past disciplinary action from the BOD, they may do so if certain criteria are met. These include: the disciplinary action being over seven years ago, the action neither financially or physical harmed a patient, the licensee is currently in good standing, and fully complied with all the disciplinary sanctions of the board.

ODA POSITION  SUPPORT

RESULT  The bill FAILED in the House Health Care Committee. However, the licensing boards agreed to meet in the interim, look at their policies, and make recommendations for changes in 2016.

HOUSE BILL 2024  Requires the Oregon Health Authority to adopt rules and procedures for training and certifying non-traditional health care workers to provide oral disease prevention.

ABOUT  HB 2024 is another bill that originated out of the City Club’s Children’s Dental Health Task Force. As the task force met with community leaders across Portland, it was identified that certain communities would prefer dental preventative services be delivered by non-traditional health workers. These individuals include: community health workers, personal health navigators, peer wellness specialists, doulas, etc. These workers would not be doing clinical work, but educational. This reasoning follows the model adopted by Coordinated Care Organizations that seek non-traditional workers to help build networks to serve Oregon’s Medicaid population.

ODA POSITION  SUPPORT

RESULT  The bill PASSED both the House and the Senate and was signed by Governor Brown.

continues
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SENATE BILL 474  Allows nonprofit charitable corporations to own and operate dental clinics that serve children with special needs.

ABOUT The Providence Specialty Pediatric Dental Clinic serves nearly 1,400 patients many of whom have a primary diagnosis of autism spectrum disorders. It also treats a significant number of children who are medically fragile—those with diagnoses of cerebral palsy, seizure disorders, Down Syndrome, and various mental health diagnoses, including severe anxiety disorders. Oregon law requires that dental clinics be owned by dentists, so to allow this clinic to continue operating, an exception to the ownership statute was needed to fix the problem.

SB 474 allows Providence to continue to provide preventive and restorative dental care for children with developmental, medical, and behavioral disabilities by enabling non-profit charitable corporations with an existing dental program serving special need children to own a dental clinic.

ODA POSITION  SUPPORT
RESULT The bill PASSED both the House and the Senate and was signed by Governor Brown.

SENATE BILL 660  Requires the Oregon Health Authority to promote oral health by ensuring the availability of dental sealant programs to students attending public schools

ABOUT In 2012, the Oregon Health Authority conducted a survey of school-aged children’s oral health. Children from lower-income households had higher cavity rates compared to children from higher-income households (63 percent versus 38 percent), almost twice the rate of untreated tooth decay (25 percent versus 13 percent), and they had more than twice the rate of rampant tooth decay (19 percent versus 8 percent). In addition, about 24,000 children age 6–9 were in need of early or urgent dental care. Up to 3,800 children in 1st to 3rd grades in Oregon reported dental pain or infection on any given day.

SB 660 requires the Oregon Health Authority to use evidence based and best practices to ensure availability of dental sealant programs to students. The bill would also expand the program to students in elementary or middle school which at least 40 percent are eligible to receive federal assistance.

ODA POSITION  SUPPORT
RESULT The bill PASSED the House and the Senate and was signed by Governor Brown.

HOUSE BILL 5014  Oregon Board of Dentistry Budget

ABOUT The Board of Dentistry (BOD) is funded with revenue generated primarily from fees paid by licensees, and applicants for licenses and permits. HB 5014 reflects increases of $75 for the biennial licensure of dentists and dental hygienists for both new and renewal licenses, effective July 1, 2015.

For dentists, new and renewal license fees would increase from $315 to $390. For dental hygienists, new and renewal license fees would increase from $155 to $230. This additional money adds a permanent full-time Dental Health Care Investigator to the BOD to reduce the amount of investigation time after a case is opened against a licensee. The entire budget for the biennium is $3,010,692.

ODA POSITION  SUPPORT
RESULT The bill PASSED the House and the Senate and was signed by Governor Brown.

THANK YOU
As we conclude the 2015 Legislative Session, and start preparing for 2016, we wish to thank the many people involved in this year’s session.

ODA expresses our gratitude to Rep. Alissa Keny-Guyer (D-Portland), Rep. Cedric Hayden, DMD (R-Roseburg), Sen. Elizabeth Steiner-Hayward (D-Portland), and Sen. Fred Girod, DMD (R-Stayton). These legislators were chief sponsors of our bills, provided testimony, and lobbied other colleagues in the legislature.

We would like to once again extend thanks to all of the member dentists and dental students who attended Dental Lobby Day this past February. In addition, we would like to thank ODA’s Government Relations Council (see sidebar) and its advisors who met monthly through the session to discuss and prioritize the over 50 bills that ODA tracked through the session.

Additionally, ODA would like to thank the co-chairs of Ways and Means, Sen. Richard Devlin (D-Portland) and Rep. Peter Buckley (D-Ashland) for making sure several of our bill received the necessary appropriation to move forward.

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ODA House of Delegates 2015
September 11–12
The Riverhouse Hotel & Convention Center, Bend

Quality Measurement in Dentistry: Trends and Perspectives for Oregon

Mega Issue Discussion


The mega-issue discussion will be led by board member Ken Chung, DMD, and will explore recent interest—in Oregon and nationwide—in identifying and developing evidence-based oral health care performance measures and measurement resources in dentistry, to advance the effectiveness and scientific basis of clinical performance measurements.

House of Delegates Items

In addition to the important discussion on trends in dentistry, delegates will be conducting business on behalf of the association related to:

- Appointment of new officers and leadership
- Election of Board of Trustees and Leadership Development Committee
- Organizational governance structure review
- Component society structural considerations
- Alternative Licensure Task Force Report and discussion
- Annual DOPAC luncheon

All members of the Oregon Dental Association are invited to join us in Bend at the House of Delegates. For information, please call 503-218-2010.
Dr. Matthew Biermann

Washington County Dental Society

What do you think the ODA needs to do to encourage more members to volunteer?

Identifying potential volunteers is important. More importantly we need to be more proactive in reaching out to people. Asking for volunteers is best. Ask directly and, if possible with a specific task to do, or position to fill.

What do you think the ODA needs to do to increase our membership market share?

Market share increase is a difficult thing, but it needs to be a priority for the association. A strong presence at OHSU is vital to be sure that when graduating, joining the association is assumed as a natural part of the profession. We do well now, but could do even better. Another area to concentrate is larger corporate practices where many doctors don’t belong to the association. We need to determine the main issues we aren’t addressing for them or highlight what we do do for them. To my understanding, Willamette Dental will pay for its doctors to belong to the ADA but they require them to attend at least one meeting per year. This seems easy, but I’ve heard from several doctors practicing there that this is the reason they don’t join even though it’s free. We may not be able to get them to join no matter. It couldn’t hurt trying to speak directly to whomever is responsible for this policy to see if they may consider changing it. Sometimes it can be as simple as that. We can’t know without trying.

What is the one thing you want members to know about your vision for your term of service?

My term will be one which I am dedicated to the betterment of the association and making a lasting difference in something I care about. I believe my duty is to steward the profession and protect the sanctity of the dentist-patient relationship which is under constant attack.

Dr. Brad Hester

Central Oregon Dental Society

What do you think the ODA needs to do to encourage more members to volunteer?

Encouraging members to volunteer their time and talents to the organization begins at the local society level. When members are involved at the local level they are much more likely to become involved at the state level. I believe the current leadership personally connecting with members in their local society is the best method to encourage involvement in both the local and state organization. Secondly, and this ties in directly with the question of increasing membership market share, is establishing value in the minds of the membership. People generally will invest their money and their time in those things that they value. There is, I believe, a fairly large disconnect between what is happening on the state and national stage, and how the member views these policies are impacting their practice. We need to do a better job demonstrating the value of involvement in organized dentistry. I would bet that a large number of the dentists, both inside and outside the association, could not name five items that organized dentistry has done for the profession in the last few years. Every dentist should know how they are benefiting from their involvement in the association. That is how we begin to build value.

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What is the one thing you want members to know about your vision for your term of service?

My vision for my term of service, should I be elected, is to improve the value of belonging as described above. Secondly, we need to have a unified and strong voice at the table as policy is made for the upcoming changes in health care delivery that will influence how we will practice dentistry in the near future. Those changes will dramatically change the way dentistry is delivered. We need to protect the sanctity of the doctor patient relationship while helping shape the changing models of delivery. As we can see from the medical profession, this will not be an easy task. I want to be involved in preserving our great profession through the changes that will occur.
Dr. Patrick Nearing

**POSITION SEEKING:** LDC

**Eastern Oregon Dental Society**

What do you think the ODA needs to do to encourage more members to volunteer?

Member involvement has continued to be an ongoing challenge for all volunteer organizations. Each generation of members has a different priority of values. The true challenge is to determine this priority and make involvement in an organization a higher priority. In my opinion, the key is building personal relationships. Our active members need to personally invite new dentists, to the ODA activities, and show them the value of the ODA, and the need for volunteerism.

What do you think the ODA needs to do to increase our membership market share?

For any organization, membership and recruitment are dependent on the member/potential member’s belief that they are getting value for their financial investment. It is important for the ODA to get their “message” out to all dentists, and to show those dentists what the ODA is doing on their behalf.

What is the one thing you want members to know about your vision for your term of service?

My personal vision for the ODA is to make the ODA as efficient and effective as possible. This past year, as a member of the LDC, we reviewed all councils and committees and examined the policies of the ODA. During this process, many of the policies were found to be outdated and were discarded. Also, many were rewritten. I found this process very valuable to help update and streamline the organization. Another personal vision for the ODA is to help mentor younger members and give them opportunities to become much more active. In doing this, these members will then see the value of the ODA and will want to help mentor others.

Dr. Karley Schneider

**POSITION SEEKING:** ADA Delegate at Large

**Multnomah Dental Society**

What do you think the ODA needs to do to encourage more members to volunteer?

Something that could be done to encourage more members to volunteer is to promote and create more volunteer opportunities that member’s family members and friends can get involved with. This would not only increase interest and member engagement, it would help maximize the impact of the event on the community.

What do you think the ODA needs to do to increase our membership market share?

I think the best thing that the ODA can do to increase membership market share is to reach more members at a student level, and introduce them to a lifelong involvement of organized dentistry. I know the ODA is always expanding on ways to connect with more students.

What is the one thing you want members to know about your vision for your term of service?

I want members to know that I have a great appreciation for the dental profession and organized dentistry. I want to be involved in any way that I can and encourage others to get involved and understand the importance of the ODA.

ODA House of Delegates

September 11–12, 2015

The Riverhouse Hotel & Convention Center, Bend
ICD-10 Compliance
Enforcement begins October 1, 2015
Lori Lambright, ODA’s Membership Compliance Coordinator, recently sat down with an ICD-10 billing expert to explore how the upcoming information on new regulations will affect dental offices. This is what the expert had to say.

Q: Isn’t ICD-10 for medical coding?
A: Currently ICD-9 is being used in dentistry to connect medical and dental diagnosis, but will be going away on October 1. ICD-10 will be the replacement and is set to become the HIPAA standard code set for diagnosis. There are many procedures in ICD-10 that will share a diagnosis or, “crossover” code that will be very helpful while billing a patient’s dental treatment to their medical benefits.

Q: What’s the biggest impact ICD-10 will have on a dental practice?
A: Dentists can optimize their acceptance rate when they first consider medical conditions that affect a patient’s oral health. Medical plans usually have no annual maximum, dental plans do. Medical plans now cover children 19 and under while some children have no dental insurance.

Q: What are some of the conditions that a dentist sees that could be considered on a medical claim?
A: Treatment for any oral health related issues but not limited to: anything bone-related, diabetes, epilepsy, heart disease, pregnancy, hormonal conditions, Parkinson’s, Alzheimer’s disease; chewing and swallowing difficulties related to: dentures, anorexia, bulimia and non-surgical sleep apnea; endodontic treatment due to trauma/medical condition, excisions/biopsies, oral surgeries, reconstruction due to trauma or genetics, or dental treatment prior to any joint replacement.

Q: What are some considerations that a dentist should use when making a diagnosis?
A: Keeping in mind the conditions listed above, a dentist should judge whether their diagnosis would support treatment that is medically necessary. Medical carriers are becoming aware that chronic oral infections and/or conditions may trigger or intensify systemic conditions.

Q: Can medical and dental codes be used in conjunction for the same procedure?
A: Once a diagnosis is determined to support medical necessity, the medical code is listed as primary, followed by dental as secondary. Both claims are submitted concurrently. One benefit to billing medically is that a specialist can list a referring provider on their original claim. When they get paid, they can share the code with the referring provider for any procedures associated with the same tooth/treatment, e.g., crown after endodontics. The referring office submits a claim and will also be paid.

Q: How will this coding affect Medicaid claims?
A: CDT-2015 has a crosswalk coding section in chapter 8, the equivalent to ICD-10. This information will help offices correctly identify diagnosis as it relates to dentistry. These crosswalk codes will be required when submitting Medicaid/OHP procedures. Carriers of in-network providers will have the authority to determine what cipher they allow; without the accurate crosswalk codes your claims will be denied.

Q: Do offices use a standard dental claim form to bill for medical procedures?
A: Offices will be required to bill all medical codes using claim form CMS 1500 (02-12). You can purchase these forms online from many retailers. Because more medical plans are offering embedded dental coverage, it is recommend that dental offices call the toll-free number on the patient’s ID card to get the correct dental claim submission address to circumvent denials.

The new CDT 2015 Dental Procedure Codes is the most up-to-date coding resource, and the only HIPAA-recognized code set for dentistry. Print, e-book, and iOS/Android app versions can be purchased at: www.ADAcatalog.org or by calling 800-947-4746.
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4 PM - Check In, Dinner & Drinks
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Donations are tax deductible (buy-ins and re-buys are not deductible). Receipts will be sent for contributions made.

Proceeds support the Kemple Memorial Children’s Dental Clinic and the Dental Foundation of Oregon to provide oral healthcare to children.
Meet Karli Herzog
The Tooth Taxi’s newest dentist

By Melody Finnemore

The Tooth Taxi’s new dentist is a lifelong Oregonian who knew early in her dental training that she wanted to work with children, particularly those who are underserved and in the greatest need of complimentary oral health care.

Karli Herzog, DDS, grew up in Portland in a family of dentists, including her mother, Jeanine Herzog, DMD, and her uncle, William Herzog, DMD. Young Karli sometimes went to work with her mother, where she saw firsthand the connection that can develop between dentists and their patients.

“It seems like you get a good patient base because you’re working with them a lot and you can really form a relationship with them,” she said. “When you have good relationships with your patients, they are more likely to listen to you in terms of oral care, and hopefully change their hygiene practices to what is best for them.”

While she was interested in dentistry, Dr. Herzog also held an affinity for the medical field. “I wanted to be a doctor, and I liked working with my hands. With dentistry you can fix the problem and take people out of pain right away. I thought that would be more gratifying than [medicine],” she said.

As she began her training at the Herman Ostrow School of Dentistry at the University of Southern California, Dr. Herzog hadn’t chosen a specialty but knew she enjoyed working with children. During dental school, she frequently helped provide free dental services for underserved children in local elementary schools.

“That was my favorite part of dental school. I think kids are hilarious, and I love working with them because they say the funniest things,” she said. “Kids really want to learn and they might not be brushing the best, but they might not know how to do it, so you can help teach them.”

Dr. Herzog graduated in May and joined the Tooth Taxi in late June. The Tooth Taxi, led by the Dental Foundation of Oregon, is a free, mobile dental clinic that serves children statewide, educates the public about oral health challenges, and advocates for programs and policies that improve care for kids.

Dr. Herzog notes that sometimes working with children requires a lot of patience and empathy, especially when they are frightened. “It always feels good when you have a kid who is scared and then they do better during the next appointment because they aren’t as scared,” she said.

Since she began working with the Tooth Taxi, Dr. Herzog has visited Gervais and Hillsboro, where she worked in the migrant community, and saw middle and high school students as well as young adults.

“That was kind of cool because one of my majors was Spanish, so I got to practice my Spanish,” Dr. Herzog said.

Dr. Herzog, who recently worked with Friends of the Children in Portland, has also volunteered her dental services in Guatemala and Honduras. She enjoys leisure travel to places such as Mexico and the Caribbean and she studied in Spain during her undergraduate years. Dr. Herzog also enjoys hiking, recently finished her first half marathon and was preparing to run the Hood to Coast relay in late August.
Fore!
Chip! for Teeth recap

June 19 was a perfect day on the links for 27 teams of altruistic players. They came out swinging at the 11th Annual Chip! for Teeth golf tournament at Langdon Farms Golf Club to raise funds to support DFO programs like the Tooth Taxi.

“Our thanks to all the sponsors, players, and volunteers who made this day such a great success,” said Dr. Weston Heringer, Jr., DFO Board President.

“Oregon is a great state because of the generous people who work together and participate for charitable causes such as our DFO.”

Our thanks to the ODA members who participated in this year’s Chip! for Teeth:

- Mazyar Afshar, DMD
- Ken Berg, DMD
- Travis Burk, OHSU student
- Bruce Carstensen, DMD
- Nic Ferguson, OHSU student
- Chet Heap, OHSU student
- Weston Heringer, DMD
- Bill Herzog, DMD
- Richard Knight, DMD
- Matthew Martin, OHSU student
- Ken McInnis, DMD
- Mike Murat, DDS
- Ron Nakata, DMD
- Pat Nearing, DMD
- Drew Pearson, OHSU student
- Allan Pike, DDS
- Troy Portash, DMD
- Dennis Reed, DDS
- Dave Renton, DMD
- Ian Salisbury, OHSU student
- Bill Scharwatt, DMD
- Justin Schmidt, DDS
- Jeff Sessions, DMD
- Kevin K. Shim, DDS
- Kevin Speer, DDS
- Steve Thurn, DDS
- Jim Windell, DMD
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GENERAL DENTISTS NEEDED FOR ESTABLISHED PRACTICES in Walla Walla, WA and Pendleton, OR. Associate positions available with the opportunity to transition into a partnership role. Please contact Stacey at (503)525-9474.

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PUBLIC HEALTH

MULTNOMAH COUNTY HEALTH DEPARTMENT HAS A VISION that includes you...Healthy People in Healthy Communities. Join a team that includes Portland's most outstanding healthcare professionals. Multnomah County Health Department is seeking on-call dentists. These positions provide direct dental treatment which includes the provision of care within all fields of dentistry, including urgency care, operative dentistry, endodontics, oral surgery, periodontics, prevention and pediatrics. Examinations, diagnosis and treatment are required. Appropriate review and management of medical histories is necessary. Dentists are also responsible for the maintenance of accurate diagnosis, consent and treatment records. The Health Department values cultural competence; ongoing quality improvement; utilization of best practices; developing and maintaining a highly qualified and competent work force; fiscal responsibility; optimally coordinated services and safely protecting patients and staff.

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PUBLIC HEALTH

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LANE COUNTY DENTAL SOCIETY presents:

Xylitol: The Oral & Systemic Benefits
Julie C. Seager, RDH, BS
Friday, October 2, 2015 8 am - 3 pm
6 CE Credits

Infection Control for the Dental Healthcare Team
Karla S. Kent, PhD
Tuesday, October 20, 2015 5:30 - 8 pm
2 CE Credits

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complete program details and registration at lanedentalsociety.org/programs

LCDS memberships include free tuition to all CE programs. Associate memberships are available to dentists outside Lane County. For more information visit lanedentalsociety.org/memberbenefits.

LCDS program registration is open to all dental staff. It is not a requirement that you be employed by, or attend with, an LCDS member dentist to register.
NEW! PORTLAND, OR - G/P poised for growth in a nice, 5-op office in SE Portland. Good easy access location.

BEND, OR PEDO - Pedodontist retiring after 30+ wonderful years. Very nice office in a great location.

SALEM, OR - Wonderful upscale G/P collecting $400K+. Beautiful newer, 5-op office, great location.

EASTERN OREGON - Excellent practice and building opportunity! Well established, high profit. G/P collecting $600K+

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WILLAMETTE VALLEY, OR - G/P collecting $1,300K+, very nice office in an excellent location.

WESTERN OR OMS - Excellent, high profit practice in the Willamette Valley. Very nice, spacious, easy access building with good parking.

NEW! S. OREGON ORTHO - Wonderful, long established ortho practice and building opportunity.

PORTLAND, OR - Excellent G/P collecting about $510K with high profit. 4 op and a wonderful location!

S. OREGON COAST - Excellent family G/P collecting $500K+. Very nice office with newer equipment.

OREGON COAST - Excellent G/P collecting $700K+. Very nice, well equipped, newer office in a wonderful location.

HOMER, AK - PRICE REDUCED! Wonderful, long established G/P collecting about $550K.

ANCHORAGE, AK - Excellent practice collecting over $900K. Practice has Prosthodontic emphasis but the production mix is varied.

MAT-SU VALLEY, AK - Excellent G/P collecting about $400K in 2013. Newer equipment.

NEW! MAT-SU VALLEY, AK - High volume G/P seeking a full-time associate with possibility to purchase. Position is 5 days per week, pays 35% of collections. Opportunity to learn.

KETCHIKAN, AK - 100% fee-for-service G/P collecting $600K. 4 ops updated about 5 years ago.

FAIRBANKS, AK - Associate wanted for busy Endo practice!

TACOMA, WA PROSTH - Well established practice collecting $400K+ in 2014. 7 ops, digital x-rays and a full denture lab. Building is also available!

WEST PUGET SOUND PERIO - Great practice with an emphasis on implants, collecting $550K+ in 2013. 4 ops, Pano and more!

BELLEVUE, WA - Highly profitable G/P collecting over $1.5M in 2014. 4 ops, digital x-rays, all in a stylish office space.

NEW! SPOKANE, WA - Associate wanted for Holistic/ Biocompatible dental practice. Approximately 26 hours per week.

NEW! BOISE AREA - Partner wanted for a wonderful G/P practice in excellent location. Collected $500K in 2014. 5 ops, digital x-rays, and more. Associate is working the practice; poised for growth!

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