



BULLETIN

CALIFORNIA SOCIETY OF PEDIATRIC DENTISTS

WINTER, 1993

VOL. XVIII, NO. 4

PRESIDENT'S MESSAGE



Dr. Paul Reggiardo, DDS

First the old news. In October, following a vigorous, but unsuccessful, appeal of his earlier decision by the State, U.S. Magistrate John Moulds ordered the California Department of Health Services (DHS) to raise reimbursement rates paid Denti-Cal providers to 80 percent of billed fees from the then current 55 percent level, finding that the Denti-Cal program violated equal access, statewide availability, timely care and comparable services provisions of the United States Medicaid Act. The DHS immediately requested an "emergency stay" of the order from the United States Supreme Court, which was denied by Justice Sandra Day O'Connor. While the State now pursues a request for an "expedited appeal" with the Ninth Circuit Court of Appeals, and still hopes to overturn the decision, the new fee schedule of maximum allowances is being implemented for services provided after November 1, 1992. Since the Ninth Circuit Court of Appeals previously heard the DHS' last appeal, which was denied after a year of protracted negotiations, the DHS will have an uphill battle to "undo" what is now done.

To give you some idea of the scope of the program change, in fiscal 1991/92 (ending July 31, 1992), the state spent \$177 million on the Denti-Cal program. Under the new reimbursement schedule, it is estimated the State will spend between \$600 and \$700 million, an increase of close to half a billion dollars! This increase, that the State can not easily afford, will be significantly attributable to increased delivery of services. More children will receive needed care. Less children will suffer unnecessary pain of dental origin, will miss school or be inattentive in school secondary to oral pain and discomfort, or will lose vital primary and permanent teeth due to abscess and infection.

The California Society of Pediatric Dentists is obviously jubilant with these long-overdue reforms of a shameful program and we hold some expectation of a dramatic improvement in the oral and dental health of our least economically advantaged children in the future.

Now the new news. The State may not share these expectations. With little hope of reversing or overturning Judge Moulds' ruling (which will require annual updates to keep reimbursement levels at

80% of billed fees), Dr. Molly Coye, Director of the California Department of Health Services, is moving forward on a "strategic plan" to expanded what the DHS calls "managed care" for Medi-Cal recipients. If you don't recognize the politically correct (politically current) term "managed care," you may be excused for substituting the outdated (politically incorrect) term "capitation." The state DHS is not rushing headfirst into managed care for dental services because it promises better care for Denti-Cal recipients. It is stampeding into managed care because it promises to be significantly cheaper.

Should we be concerned? YES, WE SHOULD BE VERY CONCERNED. Not with the concept of managed care for Denti-Cal eligible children (the State has every right to try to minimize healthcare expenditures), but with the specifics and safeguards of any managed care plan. We should be concerned there is some real *quality assessment* mechanism built into the plan to protect these children (when contracts go to the lowest bidder it at least raises the apparition of sloppy and slipshod care). And, we should be concerned that there are adequate mechanisms to measure *access to care*. Judge Moulds' ruling was based on the fact that under the previous Denti-Cal program, children simply were denied access to care because not nearly enough providers could be enticed into the system. Recipients couldn't locate dentists to treat and couldn't get appointments for care. Under a managed care plan, it would be very possible to manipulate measurements of treatment provided and hide program deficiencies from outside scrutiny. An appointment is actually provided (if the appointment is kept at all), will not improve the system — yet it could be reported as a "treatment visit" in reported statistics purporting to show adequate access to care.

Am I worried? YES.

DENTI-CAL LAWSUIT UPDATE

CCS TABLE OF MAXIMUM ALLOWANCES

The new fee schedule was put into effect November 1, 1992. This brought a select group of fees to 80% of UCR based upon data submitted over the course of an earlier 12 month period.

For years the state has been reimbursing for work done under the CCS program with fees equal to the Denti-Cal schedule of fees.

You may want to review benefit statements you have received to determine whether or not the appropriate reimbursement was made. If not, resubmit your billings. For additional information, contact your local County CCS office.

DR. HEBER SIMMONS NEEDS YOUR SUPPORT

Dr. Heber Simmons, Jr., past President of the American Academy of Pediatric Dentistry, has announced his candidacy for President-Elect of the American Dental Association. Heber will continue his tenure as ADA Trustee during the time of his campaign which must be planned and funded quickly. The election will take place during the 1993 ADA Annual Meeting in San Francisco.

Heber has a distinguished, thirty-year career which has included leadership in numerous areas of organized dentistry. He has made contributions to the entire profession. Heber displays leadership qualities that the President of the ADA must have to interface effectively with the public, legislators and governmental agencies.

As you may recall Heber was the person chosen to represent the American Dental Association in the televised amalgam controversy on "Sixty Minutes." He spoke effectively, rationally and scientifically to the issue under the most difficult of circumstances. He is also taking a strong stand on make OSHA standards more reasonable, particularly as they affect pediatric dentistry.

Seeking the office of ADA President-Elect requires a tremendous financial investment. This includes travel to various dental meetings throughout the country, production and distribution of campaign materials, and campaign activities during the ADA meeting in San Francisco. In June of 1993 Heber will address the California ADA delegates in Sacramento.

In California Warren Brandli, Dave Good, Weyland Lum and Mel Rowan are actively supporting and requesting funds to allow Heber to have an effective campaign. Contributions should be made to the *Heber Simmons Campaign* and sent to one of the above for forwarding to the campaign committee.

CONTENTS

FEATURES

<i>President's Message</i>	1
<i>Dr. Heber Simmons Needs Your Support</i>	1
<i>Guest Editorial</i>	2
<i>Clinician's Corner</i>	2
<i>Latex Allergy</i>	2
<i>MCH Oral Health Needs Assessment Project</i>	2
<i>CSPD Mentor Program</i>	2
<i>American Board Noninee From CSPD</i>	3
<i>CSPD Speakers Bureau</i>	3

COMMITTEE REPORTS

<i>Board Briefs</i>	3
<i>Membership News</i>	4

ANNOUNCEMENTS

<i>Denti-Cal Lawsuit Update</i>	1
<i>Practice Administration Course</i>	2
<i>Hi, Ho Silver(ado)</i>	4

CLASSIFIED	4
-----------------------------	---

CLINICIAN'S CORNER

Ed. note: The following information was presented as a table clinic at the Rancho Bernardo Scientific Session.

SYSTEMS THAT REMOVE FLUORIDE FROM OUR WATER

There are eight basic types of point-of-use (POU) systems available on the market today. They are:

- Absorption through activated carbon
- Anion exchange
- Cation exchange softening
- Disinfection
- Distillation
- Filtration
- Oxidation
- Reverse Osmosis (RO)

These systems can be used alone, or in combination. They reduce or rid the water of inorganic and organic contaminants. They eliminate foul odor, taste, color and cloudiness. They produce water that is clear, clean and taste free.

The RO, distalization, and absorption systems remove fluoride from the water. Depending on the size and type of system, it will remove between 90-99% of the fluoride in the water.

The amount of supplemental fluoride you prescribe to your patient can be affected by the type of POU system in your patient's home.

ED: For more complete information see; JDC, Sept-Oct 1991, Glass.

LATEX ALLERGY
Scientific Alert

The Center for Disease Control has reported a cluster of anaphylactic reactions in one pediatric hospital among children during surgery. The report was filed in the July 5, 1991 Morbidity and Mortality Weekly Report.

Of the eleven children, ten had spina bifida, and *all* reportedly had a positive allergy test for latex. A survey suggested that similar reactions have been seen at 25 other institutions since January 1990. Again, children with spina bifida seem to be primarily affected.

Precautionary notes:

If surgery cannot be postponed, precautions to ensure minimal contact with latex should be taken.

Avoid latex contact in all kinds with spina bifida-meningo-myelocele!!

When placing a rubber dam, use a cloth or paper pad between the dam and the patient's skin.

MCH ORAL HEALTH NEEDS ASSESSMENT PROJECT

The Maternal and Child Health Branch of the California Department of Health Services, through a contract with the Dental Health Foundation, will be conducting a statewide oral health needs assessment of children from preschool to the twelfth grade. The principal component of the assessment will be an oral health survey on a sample of 10,000 to 15,000 possible, to determine the prevalence of oral health diseases and conditions, including Baby Bottle Tooth Decay, and factors associated with oral health status.

The assessments will begin in July, 1993 and will continue until December, 1993. A 1-day training session will be held at least one month before the exams in order to provide up to ten examiner/recorder teams with information on how to conduct the assessment using portable dental equipment, as well as knowledge on the use of laptop computers and software designed specifically for collecting and analyzing the oral health survey data.

The project is interested in using pediatric dentists to conduct the assessments, particularly in assessing the prevalence of Baby Bottle Tooth Decay, which will take place in licensed day care centers. All travel expenses will be incurred by the Dental Health Foundation, and each dentist will receive a daily stipend.

The CSPD Board has recommended that the membership be supportive of this project, and encourage the membership to participate. Contact Joanne P. Wellman at (916) 327-8903.

CSPD MENTOR PROGRAM

CSPD is pleased to introduce its newly developed Mentor Program. The goals of the program are to welcome young pediatric dentists into organized dentistry, to aid them in becoming successful pediatric dentists, and to provide guidance regarding practice concerns. It also provides the established pediatric dentist with an opportunity to contribute to the profession and to assist a new colleague. The CSPD Mentor Panel is now being formed. The panel consists of a group of experienced pediatric dentists who volunteer their expertise. Our thanks go out to the following members who will be volunteering their time to mentor postdoctoral residents from U.C.L.A., U.S.C., and U.C.S.F.:

- | | |
|--------------------|--------------------|
| Dr. David Chin | Dr. Gary Okamoto |
| Dr. Wanda Claro | Dr. David Okawachi |
| Dr. Santos Cortez | Dr. Conrad Sack |
| Dr. Frank Enriquez | Dr. Karen Sue |
| Dr. Neil Katsura | Dr. James Yee |

If you are a young pediatric dentist member (less than five years out) who would like a mentor, or if you are an experienced member who would like to serve as a mentor in your area, please let us know. Write to Dr. Ann Azama, Young Pediatric Dentist Recruitment, 384 11th Ave., S.F., CA 94118.

The 1990's will be a fascinating decade as far as dentists are concerned. Monumental changes are about to occur with regards to the development and implementation of alternative dental and medical delivery systems. Most of us, to some extent, have been aware of these alternative models of dental care, but we have paid little attention to them. We have all heard mention of the alphabet soups; PPO, IPA, HMO, etc. My question is do we understand them. Do we know how to potentially make them work in our practice or have we stood on the sidelines and said I don't believe in them, they're not my cup of tea and I hope they will just go away.

I am writing this piece to tell our members, this is not an attitude we can afford to take. "WAKE UP AND SMELL THE FORMOCREASOL." Change is upon us. Forces greater than us are pushing dental and health care models into practice that we may not agree with. I believe in the coming year there will be major efforts at the State and Federal level to make managed care the main thrust of health care delivery in our country. It has already happened to medicine in a major way. It is starting to happen to dentistry now.

This year 150,000 L.A. Unified School District teachers and their dependents were switched from Connecticut General Indemnity insurance to a CIGNA modified HMO program. As president of the Los Angeles Dental Society I had multitudes of our members screaming how could we let this happen. Presently many school systems throughout the State are watching this change closely and have expressed interest in following the Los Angeles model.

This year after winning a court battle that raised Denti-Cal reimbursement to an acceptable level, we could very well see all or part of the program change to a managed care model. The State Department of Health Services is presently in the process of coordinating a managed care strategic plan. This could end up affecting access to care and/or the well being of the children in this program significantly.

I have talked to several insurance company dental directors who speak with great confidence in expressing their opinion that traditional indemnity insurance is on the decline and at some point may not be viable anymore.

The question arises, then what do we do? For me there is only one suitable answer. We must be pro-active. We must get involved in working with government and private industry in developing a dental delivery system that we all can live with. It is not enough to say that a certain delivery system is inappropriate. We must offer alternatives that everyone can live with, or we will end up with something that no one can live with.

— Scott Jacks

CSPD-member Scott Jacks is President of the Los Angeles Dental Society and maintains a private pediatric dental practice in South Gate.

AMERICAN BOARD NOMINEE FROM CSPD

Each year the American Academy of Pediatric Dentistry nominates two candidates for the single position of Director of the American Board of Pediatric Dentistry. This year the two nominees are Dr. Michael W. Roberts of North Carolina and Dr. Larry S. Luke, a member of CSPD.

Larry twice served on the Board of Directors for CSPD and currently serves as President of the Professional Activities Committee. He is a Clinical Professor in the Sections of Pediatric Dentistry and Orthodontics at UCLA and has his private practice in Simi Valley.

Larry has served as consultant to the American Board for the past two years for the section on Growth and Development. He also serves as a consultant to the Council of Dental Education of the American Dental Association for the purpose of accrediting Pediatric Dental graduate programs.

Larry states that he would try to ensure that the Board exams are fair and accurate measures of the competence of pediatric dentists. The exams should be relevant to clinical practice in the 90's and should assure quality in treatment for the public. He wants to encourage access to Directors of the Board so that all pediatric dentists might feel encouraged to take the exams. Larry says he would work with graduate programs to encourage beginning the examination process while still in school.

CSPD encourages all its members to vote in Kansas City. If you are unable to attend the AAPD meeting, request a mail ballot as indicated in the meeting notices that you will be sent or call the AAPD office and request a ballot (1-800-544-2174).

PRACTICE ADMINISTRATION COURSE

The American Academy of Pediatric Dentistry is sponsoring the Third Annual course in Pediatric Dental Practice Administration October 8, 9, and 10, 1993, in Denver, Colorado. AAPD member attendees are encouraged to bring their staffs.

Presentations will be made by Dr. Roger Levin, and five Academy members on key practice administration issues. Dr. Betty Barr's staff will present a program to staff members in attendance.

Look for the CE sign-up announcement prior to the Kansas City Annual Session.

Questions — contact Dr. Warren Brandli, Co-Chair of the AAPD Practice Administration Subcommittee.

BOARD BRIEFS

October 17, 1992

The 71st meeting of the Board of Directors of the California Society of Pediatric Dentists was called to order by President, Paul Reggiardo, on October 17, 1992, at the San Francisco Marriott Hotel. The members present at this meeting were Drs: Reggiardo, Wolkstein, Berger, Pedersen, Lisagor, Howard, Barber, Lum, Stewart, Duperon, Grossman, Grobowsky, Azama, and Sobel. The members absent were Drs: Dixon, Blain, and Chan. The President presided over a lengthy and comprehensive meeting. Dr. Reggiardo began by discussing a great deal of correspondence that he has dealt with between Board Meetings, as well as the proposed Membership Directory changes. Dr. Reggiardo then introduced the Officer's reports.

President, Dr. Reggiardo, discussed and the Board debated details concerning the associate member policy, and the student member policy. Dr. Reggiardo also presented and discussed information concerning the CDA Internal Disciplinary Affairs Meeting.

President-elect, Dr. Wolkerstein, presented information concerning the 1993 Silverado meeting, as well as the development of a CSPD condolence letter and policy.

Vice President, Dr. Berger, presented information concerning the 1984 annual meeting at Rancho Mirage, as well as the strategic planning for the Executive Director's responsibility and compensation.

Secretary, Dr. Pedersen, presented information concerning the 1995 annual meeting in Ojai, as well as the development of the Secretary's calendar and notebook.

Treasurer, Dr. Lisagor, presented the amended 1992-1993 budget and presented the first quarter financial report.

Editor, Dr. Howard, presented the Bulletin changes and modifications.

Executive Director, Dr. Barber, presented information concerning the Executive Director's correspondence and interactions, as well as the "Kids Care Fair."

The immediate Past President, Dr. Sobel, presented information concerning the Pediatric Dental Career Recruitment Program and other items concerning non-dues income.

The District Six AAPD Trustee Report by Dr. Lum was presented and discussed.

Dr. Reggiardo then requested each of the Committee Chairman's to give their report. The Committee Reports were lengthy and detailed and the reports from each Committee were presented, discussed, and debated. There continues to be numerous CSPD projects being developed, specifically with the Public and Professional Relations Committee hard at work with the Hispanic community public service announcement, the development of a joint conference with CSPD and the California Chapter of the American Academy of Pediatrics, the Athletic Mouth Guard Program development with CSPD and CDA, and the sponsorship of the CSPD reception at AAPD at Kansas City by Space Maintainers Laboratory. The Editorial Committee reported several items concerning articles for the California Pediatrician, as well as changes in the format for the Bulletin. The Constitution and By-Laws Committee was diligently at work making changes concerning our by-laws in a clear fashion. The Dental Care Committee with Chairperson, Dr. Grossman, is hard at work with such items as the California Health 2000 Program, the Denti-Cal Program, restraint guidelines, Matsui Bill, and the ADA ethics revision. The Credentials and Membership Committee Report included information concerning the strong membership numbers of CSPD, as well as the continued development of the Graduate Student Mentor Program being presented by Dr. Azama. The Peer Review Committee presented its report and Dr. Taylor is to be congratulated on his continued dedication to this committee. Dr. Lisagor gave a report on the 1996 CSPD site selection and has proposed Pasadena and the Ritz Carlton as the location.

Dr. Reggiardo then presented information on the ADHOC Committees. Dr. Lisagor is continuing to develop the Auxiliary Continuing Education Program and Dr. Grobowsky, with help from other committee members, continues to develop the patient information material.

Dr. Reggiardo presented the continuing business information. The following motions were presented, discussed, debated, and passed.

Motion 01: Lisagor/Duperon

That the following changes in the Membership Directory be made:

1. Addition of spouse's name (optional).
2. Addition of member's FAX numbers.
3. Utilization of full zip code with four numbers.
4. Addition of the membership's home phone number (optional).

Motion 02: Sobel/Duperon

That CSPD Policy Manual be re-worded to reflect the actual By-Law statement concerning associate membership status, i.e., associate membership status is intended for individuals otherwise eligible for membership in the society, but residing outside of California.

Motion 03: Wolkstein/Sobel

That a letter of condolence be drafted and sent to the family of any member who has suffered the loss of an immediate family member or the member him or herself. This letter is to be placed on CSPD's letterhead and will include the President of the Society.

Motion 04: Pedersen/Stewart

That the amended budget proposal for 1992-1993 be accepted.

Motion 05: Sobel/Stewart

That CSPD endorses and supports the plan as outlined by David Perry regarding the recommendations for CDA's Council on Dental Health Programs on the oral facial protectors. CSPD supports Dave Perry's resolution: CSPD agrees to form a network of dentists to work with CDA to assist component dental societies in developing a local mouth protector program that would provide mouth guards for local youth athletes.

Motion 06: Lisagor/Sobel

That the proposed changes to the Constitution and By-Laws be accepted with the exceptions of Number 4, 6, 7, and 11.

Motion 07: Duperon/Azama

That the proposed changes to the Constitution and By-Laws concerning Chapter I, Section 2F be amended and written as Number 4 on Page 8D of the Constitution and By-Law changes.

Motion 09: Lisagor/Sobel

That the Constitution and By-Laws be amended under Page 4, Chapter II, Section 5 to read as: At a regular meeting of the chapter, a mail ballot may be requested by a majority of the members present or at the discretion of the Board members.

Motion 10: Sobel/Duperon

That the Constitution and By-Laws be amended to read as: Item 8D (11) Page 6, Chapter V, Section 1A of the Board handout.

Motion 11: Stewart/Grossman

That CSPD participate as a sponsor in Oral Health 2000 without a financial commitment at this time.

Motion 12: Sobel/Azama

That Dr. Lisagor's committee formulate details concerning an auxiliary continuing education course (to include program speakers, hotel, contracts, etc.). This information is to be presented at the next Board meeting.

Motion 13: Berger/Howard

Resolved that CSPD will make a proposal or proposals to the Site Selection Subcommittee of the American Academy of Pediatric Dentistry for the 1998 Annual Meeting. In addition, be it resolved that CSPD will offer to be the Host Component should the proposed site or one of the proposed sites be selected by the Academy for the 1988 Annual Meeting.

The following motion was presented, discussed, debated, and not passed.

Motion 08: Lisagor/Sobel

That the Constitution and By-Laws be amended to read: All active and life members of the society shall be entitled to hold office, serve as chair committees and serve on committees. Candidates for the Board of Directors shall, in addition, be a member of the American Academy of Pediatric Dentistry.

As the issues and topics for pediatric dental care on the state level continue to increase, the Board of Directors is taking a diligent and pro-active stance to give guidance and leadership for pediatric health care in this state. The Officers, Board Members, and Executive Director continue to be dedicated to this goal. They are to be congratulated for the great amount of time and effort given for the success of our society.

Jac W. Pedersen II, D.D.S.
Secretary, CSPD

CLIP HERE CLIP HERE CLIP HERE CLIP HERE CLIP HERE

CSPD SPEAKERS BUREAU

The Board of Directors for CSPD has determined that it would be advantageous for our organization to develop a "speakers bureau" consisting of individuals who could address various topics concerning oral health in children and adolescents. A list of topics has been compiled, however, we are in need of several individuals who would be prepared to deliver presentations to physicians or other health care providers on these topics.

1. Fluoride/Current Concepts and Applications.
2. Amalgam vs. Alternative Restorative Materials.
3. Nutrition & Dental Health.
4. Baby Bottle Tooth Decay Prevalence & Prevention.
5. Oral Pathology in Infants and Children.
6. Child Abuse Detection and Prevention.
7. Growth and Development of the Primary Dentition. Detection and Intervention of Developing Malocclusions.
8. Teething and Associated Problems: A Program for California's Children.
9. Oral/Facial Athletic Protectors: A Program for California's Children.

10. Sedation of the Pediatric Dental Patient.
11. Preventing Dental Disease in Underserved Pediatric Populations. (Sealants) (Fluoride)
12. Dental Health Considerations in Immune Compromised Pediatric Patients.
13. Infant Dental Health.
14. Diagnosis and Treatment of Trauma to Dental and Facial Structure in Infants, Children and Adolescents.

If you would be interested in being listed as a speaker for any of these topics or have ideas on additional topics not listed please return the attached form to the CSPD office at your earliest convenience.

Name _____
 Address _____
 Phone _____
 1. _____
 2. _____
 3. _____
 Additional Topics: _____

DID YOU KNOW ABOUT MICRA?

ED: The following information was taken from a pamphlet produced by CAPP (Californians Allied for Patient Protection).

MEDICAL INJURY COMPENSATION REFORM ACT

In 1975, California was the first state hit by a nationwide crisis. Responding to a meteoric rise in the number of malpractice suits filed and a dramatic increase in the amounts awarded, insurance carriers increased malpractice premiums 300 to 400%, or cancelled coverage altogether. Some professional liability companies became insolvent.

MICRA was the California Legislature's solution. It provided for closer scrutiny of professional practice by requiring reporting of judgments or settlements arising from professional negligence to licensing boards, and by revamping board structure and powers. The Legislature then mandated tort reform measures which included four major provisions:

- Cap on non-economic damages (pain and suffering) at \$250,000; no cap on economic losses;
- Limitation of lawyers fees; 40% of the first \$50,000, decreasing to 15% of any amount over \$600,000
- Disclosure of double recovery; aides the jury in award settlement decisions; and,
- Periodic payment of future damages to preserve funds for medical treatment or income as they accrue in the future.

As a result of MICRA's passage California's professional liability insurance costs are lower than those paid by health care providers in comparable states where the crisis continues. In 1990, California premiums were a half or a third of those in states that had not enacted MICRA-type reforms.

California health care costs are lower. Although California's general consumer costs were higher than the nation's in 1991, it's medical care services index was lower.

The current truce between plaintiff's attorneys and those who pushed for the passage of MICRA will soon end. CAPP's proponents argue that without the continuation of this reform package, liability premiums will once again soar.

IS AN SEP RIGHT FOR YOU?

There's good news for small Dental practices and self-employed Dentists who are looking for a 1992 tax deduction or a way to reward employees for performance. The IRS will allow small businesses to establish a Simplified Employee Pension plan (SEP) in 1993 up until their tax filing due date (including extensions) for the 1992 tax year. Contributions to this plan will grow tax-deferred and are an effective way to accumulate assets for retirement. The applicability of the SEP or any retirement plan, for that matter, to your business situation should be reviewed by an accountant or tax advisor.

Major features include:

- A current tax deduction on all eligible contributions made by the employer;
- No fixed contribution requirement for the employer;
- Self-directed employee retirement accounts limit the employer's fiduciary responsibility;
- Flexibility to establish and/or fund the plan by your company's tax filing date (including extensions);
- No costly reporting requirements;
- Employees can make salary reduction contributions if the employer adopts optional salary reduction SEP plan provisions;
- Employees may be able to make a contribution to their IRA in addition to their salary reduction contribution within the SEP plan.

Under a SEP plan, the employer determines what amount, if any, to contribute to an IRA set up for each employee. The SEP plan contributions in an amount up to 15% of compensation or \$30,000 (whichever is less), may be deducted as a business expense. Each year the employer decides to contribute to the plan, the same percentage contributions must be made for all eligible employees. However, the actual amount may be adjusted by integrating the SEP plan contribution with Social Security payments. SEP plan payments are not taxable as current compensation to the employer or the employee until they are withdrawn from the SEP plan. Until then, all earnings grow tax-deferred.

Because each employee has his or her own separate account, the employer has minimal fiduciary responsibility to the plan. Therefore, each employee can select investments best-suited to his or her own situation. The choice of investments allowed within a SEP plan cover a wide range and include stocks, bonds, mutual funds and money market funds.

Unlike most other business retirement plans, a SEP plan requires no annual administration and no 5500 filing. These are positive features for small businesses which may be burdened by government paperwork. Minimal reporting requirements are also a great cost saver and make this plan popular among small businesses. Under an optional provision of the SEP plan, if the employer adopts a salary reduction plan an employee may be able to make salary reduction contributions.

As an additional benefit to the employee, the IRS will allow the employee to make an additional IRA contribution of up to \$2,000 to the SEP plan. This can be made to the same account, which holds the salary reduction contribution and the employer's contribution. However, this IRA contribution may or may not be deductible depending on the level of the employee's income. With this in mind, if the employee maintains one or more IRAs outside this plan, it may be possible to consolidate all of his or her IRAs within the SEP plan. The benefits to the employee may be a reduction of IRA maintenance costs, less paperwork, improvement of performance tracking and the ability to pool funds for greater investment purchasing power.

Charles Corley is a Financial Consultant for Shearson Lehman Brothers in Menlo Park, CA. He has handled the investment account for the California Society of Pediatric Dentists for the past two years.

CSPD SPONSORS CONTINUING ED FOR AUXILIARIES

Responding to the scarcity of meaningful, relevant continuing education currently available to auxiliary staff of pediatric dental practices, CSPD has embarked on a new program, sponsoring the first ever continuing education course designed *exclusively* for auxiliary staff members of CSPD member offices.

The course, "Learning More About the Children We Serve," will be offered in two different geographic locations, to make it as convenient as possible; on Saturday, April 24, at the San Francisco Airport Marriott Hotel, and again, on Saturday, May 22, at the Los Angeles Hilton Airport Hotel.

Stephen Blain, DDS, MS, will present aspects of "Behavioral Pediatric Dentistry," providing a clinically related discussion of several major concepts in the behavioral sciences of pediatric dentistry. Dr. Blain, Associate Dean of Student and Alumni Affairs at UCLA and Associate Professor of Pediatric Dentistry, is also a member of CSPD's board of directors. His presentation, using videotape examples, interactive teaching and selected readings, will enable participants to understand developmental determinants experienced by children and adolescents and how they affect patient management; concepts of social learning theory and behavior modification; parental concerns and responsibilities as they relate to participation in management of the patient; recognition and self-evaluation of providers' behavior and expectations to enhance patient/parent cooperation; ethical and legal considerations relevant to treatment and how they affect methods of patient management.

Following a hosted luncheon designed to promote interaction between staffs of different offices, the second presentation will be given by Terri Lisagor, MS, RD. Lisagor, a retired elementary school teacher, has a master's degree in nutrition, is a registered dietitian, and has taught nutrition and food science at Cal State University at Northridge since 1988. She is also a registered dental assistant, who has taught diet and oral hygiene concepts to patient families within a pediatric dental practice since 1977. The presentation will focus on current concepts of diet and nutrition relating to children; the relationship of diet to dental disease; understanding the new Food Guide Pyramid; special concerns in childhood (milk allergies, vitamin supplements, eating habits); techniques of teaching nutritional concepts and oral hygiene to parents and children in a pediatric dental office.

This will be a first class experience for our valuable pediatric dental team members. All CSPD members are encouraged to provide this opportunity to their staff as one more way to tell them how important they are to us and our patients.

Brochures containing complete course descriptions and registration materials were mailed to all CSPD members in February. Tuition for staff persons of CSPD members is only \$55, including luncheon and coffee breaks. For those needing overnight accommodations, a special room rate has been negotiated.

Mark Lisagor

LOOK BEFORE YOU LEAP

LAUSD MANAGED CARE PROGRAM

CIGNA Dental Access (CDH), a point-of-service "insurance program", has now replaced the previous Connecticut General sponsored "fee-for service" program.

Participating dental offices available to LAUSD members are all general dental facilities. Participants of CDH must register with one of these offices (or be randomly assigned to one of them). It is possible for a child to be referred out to a specialist's office, after a "speciality referral form" is signed by both the parent and the general dentist. The specialist seen must have signed a Dental Specialist Agreement provided by CDH.

So far, no problem. NOT!

Anytime you willingly enter into a contractual agreement, you are bound to the contents of that agreement. Before you sign on the dotted line, have an attorney knowledgeable in contract law review the contents of that agreement.

The ADA's Contract Analysis Service has provided CDA with a legal review of the CDH Dental Provider Agreement. If you are considering participation in the CDH program, you should avail yourself to this analysis.

As an aside, the fee schedule that you may use for those patients referred from a CDH general dental facility will be provided to you by CDH at the time you sign on the dotted line.

Weyland Lum

CONGRATULATIONS

MELVIN D. FELDMAN, DDS

On two counts we wish to congratulate our colleague. Firstly, he has been appointed as Volunteer Clinical Instructor at UCSF.

Secondly, Dr. Feldman has just been awarded a patent for a new type of toothbrush. Called, "TOOTHFLASH," it illuminates the teeth while brushing them. A thick handle provides for a secure and balanced grip.

PERMIT NO. 39
Palos Verdes, CA
PAID
U.S. POSTAGE
BULK RATE

CALIFORNIA SOCIETY OF PEDIATRIC DENTISTS
P.O. BOX 2328
PALOS VERDES PENINSULA, CA 90274



Officers and Members of the Board of Directors — 1992-1993

PRESIDENT:	Dr. Paul Reggiardo, DDS, 17742 Beach Blvd., #320, Huntington Beach, CA 92647	(714) 848-0234
PRESIDENT-ELECT:	Dr. Philip Wolkstein, DMD, San Jose, CA 95119	(408) 578-6550
VICE PRESIDENT:	Dr. Suzanne Berger, DDS, 1222 Mission Verde Drive, Camarillo, CA 93010	(805) 484-2705
SECRETARY:	Dr. Jac Pedersen, II, DDS, 620, California Blvd, #M, San Luis Obispo, CA 93401	(805) 544-8111
TREASURER:	Dr. Mark Lisagor, DDS, 3687 Las Posas Road, Camarillo, CA 93010	(805) 484-2705
PAST PRESIDENT:	Dr. Richard Sobel, DDS, 2901 Lone Tree Way, Antioch, CA 94509	(510) 757-4220
EDITOR:	Dr. Stephen Howard, 18411 Clark St., #306, Tarzana, CA 91356	(818) 343-9119
EXECUTIVE DIRECTOR:	Dr. Thomas K. Barber, 2 Pear Tree Lane, Rolling Hills East, CA 90274	(310) 377-3925
	FAX for Dr. Barber	(310) 206-5539
DIRECTOR '93N:	Dr. Wayne Grossman, DDS, 2001 Zinfandel Drive, #B3, Rancho Cordova, CA 95670	(916) 638-8778
DIRECTOR '93N:	Dr. Ray Stewart, DMD, MS, 1055 Los Palos Dr., Salinas, CA 93901	(408) 424-0641
DIRECTOR '94N:	Dr. Stephen Chan, DDS, 1900 Mowry Avenue, #406, Fremont, CA 94538	(510) 791-0971
DIRECTOR '94N:	Dr. Ann Azama, DDS, 384 11th Ave., San Francisco, CA 94118	(415) 668-0600
DIRECTOR '93S:	Dr. Richard Grabowsky, DDS, 3811 San Dimas St., Bakersfield, CA 93301	(805) 327-7541
DIRECTOR '93S:	Dr. Donald Duperon, DDS, School of Dentistry, Center for Health Sci.	(310) 825-0691
DIRECTOR '94S:	Dr. Stephen Blain, DDS, School of Dentistry, Center for Health Sci., UCLA Rm A3-042, Los Angeles, CA 90024	(310) 825-0691
DIRECTOR '94S:	Dr. Howard Dixon, DDS, 5627 Oberlin, Dr., Ste. #100, San Diego, CA 92121	(619) 452-7272

1992-1993 STANDING COMMITTEES

NOMINATING COMMITTEE:

Paul Reggiardo, Chairman, President, Non-Voting
Richard Sobel, Immediate Past-President
Michael McCartney, 2nd Past President
Lonnie Lovingier, Member-At-Large
Wilfred Nation, Member-At-Large
David Taylor, Member-At-Large

PUBLIC AND PROFESSIONAL RELATIONS:

Ray Stewart, Chairman
Donald Duperon, Liaison Calif. Chapter AAP
Howard Dixon, Professional Organization
Outreach Coordinator
Michael McCartney, Liaison AAPD
David Perry, Liability Insurance Advocate

JOINT CSPD/CA CHAP AAP CONFERENCE

Ray Stewart, Chairman
Donald Duperon Richard Sobel

EDITORIAL COMMITTEE:

Stephen Howard, Editor & Chairman
Suzanne Berger Steven Chan

CONSTITUTION AND BYLAWS:

Richard Sobel, Chairman; Immediate Past President
Richard Grabowsky Warren Brandli

DENTAL CARE:

Wayne Grossman, Chairman
Stephen Blain Steven Chan
Ann Azama Richard Mungo

CREDENTIALS AND MEMBERSHIP:

Jac Pedersen, Chairman; Secretary
Ann Azama, Graduate Student Liaison
Steven Chan
Thomas K. Barber, Ex Officio

PEER REVIEW:

David Taylor, Chairman
Paul Reggiardo
Richard Sobel, Board Liaison

PROFESSIONAL ACTIVITIES:

Larry Luke (UCLA), Chairman
Richard Udin (USC)
David Rothman (UOP)
Donald Duperon, Board Liaison

ANNUAL MEETING AND SITE SELECTION:

Mark Lisagor, Chairman
Stephen Howard Stephen Blain
Richard Grabowsky Howard Dixon
Donald Duperon Thomas K. Barber,
Ex Officio

AD HOC COMMITTEES

PATIENT INFORMATION MATERIALS

Richard Grabowsky, Chairman
Weyland Lum Richard Sobel

AUXILIARY CONTINUING EDUCATION

Mark Lisagor, Chairman Ann Azama

DISTRICT VI AAPD TRUSTEE

Weyland Lum, DDS (415) 668-0600

MEMBERSHIP NEWS

Our CSPD roster continues to grow—the current membership now stands at 402.

We wish well the following retired members:

Dr. Harry Plett – who practiced in Pleasonton;

Dr. Paul Barkin – a charter member who practiced in Sacramento and was a faculty member at UCSF for many years;

Dr. Irving Green – a charter member who practiced in Sunnyvale.

The following seven members are new to our roster. We at CSPD welcome you and encourage your active participation in our organization:

Dr. Jayne Delaney: Active Member in practice with Dr. A. Soderstrom in Modesto. DDS U. Detroit, Certificate & MSD U of Conn. '84 and was in teaching and research at University of Texas, San Antonio '84-'92 before coming here.

Dr. Santiago Surillo: Student Member at UCLA in the combined Pedo/ortho program finishing in '95. He received his DDS at Indiana in '87.

Dr. Su-Min Wang: Active Member. Received a DDS at National Taiwan Univ. and studied Pedo at Minnesota finishing in '86. Currently practicing in Laguna Hills.

Dr. Gary Niu: Active Member. DDS at Penn. in '85, completed the combined pedo/ortho program at UCLA in '89 and has offices in Alhambra and Irvine.

Dr. Ned Savide: Associate Member. DDS at Loyola, Chicago '75, Pedo at UCLA '77 and practices in Palos Heights, ILL

Dr. Jon S. Ousley (Yes! Jon is correct) DDS at Baylor '68. Certif in Pedo at U Texas, Houston '75 and practices in Dallas.

Dr. Evangeline Uy: Active Member. DMD at the Univ. of the Philippines, Certificate and MS in Pedo at Univ. of Pittsburgh '92. Practices in Torrance.

MEMBERSHIP STATUS

Active	319	Faculty	10
Associate	14	Life	24
Retired	6	Honorary	1
Students	28		

Thomas K. Barber

CLASSIFIED

INLAND EMPIRE AREA. Tremendous opportunity to build a practice for a motivated, board certified/eligible pediatric dentist. Clinical orientation, ortho proficiency desirable. Contact David Markle, DDS, FAAPD — Riverside Dental Group (909) 689-5031; or FAX resume to Riverside Dental Group, (909) 352-2048, attention Dr. Markle.

BULLETIN

CALIFORNIA SOCIETY
OF PEDIATRIC DENTISTS

Published 4 times annually

EDITOR

Stephen J. Howard, D.D.S.

CSPD members are encouraged to contribute to the Bulletin. Articles, Letters to the Editor, or other items of interest are welcome. The next deadline for submission is April 8, 1993. Items for publication must be double spaced, typewritten and of reproducible quality for Xerox or Fax.

Products and informational content presented in the Bulletin by contributing authors are not necessarily supported by the Executive Board of CSPD.

HI, HO, SILVER(ADO)

Who was that masked man?
Why, it's Phil Wolkstein.
Our President-elect has put
together a wonderful scientific
and social gathering at the

SILVERADO COUNTRY CLUB

April 1-4, 1993

JOIN US!