

Aspect

A QUARTERLY NEWS BULLETIN

Great Health Starts Here[®]

Autumn 2016
Issue 3

Welcome to Aspect, Nevada Dental Benefits, Ltd.'s quarterly newsletter, through which we offer contemporary news information on oral health, the dental industry, the latest research and advice for providers.

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Associations Between Cannabis Use and Physical Health Problems in Early Midlife

A Longitudinal Comparison of Persistent Cannabis vs Tobacco Users

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IMPORTANCE

After major policy changes in the United States, policymakers, health care professionals, and the general public seek information about whether recreational cannabis use is associated with physical health problems later in life.

OBJECTIVE

To test associations between cannabis use over 20 years and a variety of physical health indexes at early midlife.

DESIGN, SETTING, AND PARTICIPANTS

Participants belonged to a representative birth cohort of 1037 individuals born in Dunedin, New Zealand, in 1972 and 1973 and followed to age 38 years, with 95% retention (the Dunedin Multidisciplinary Health and Development Study). We tested whether cannabis use from ages 18 to 38 years was associated with physical health at age 38, even after controlling for tobacco use, childhood health, and childhood socioeconomic status. We also tested whether cannabis use from ages 26 to 38 years was associated with within-individual health decline using the same measures of health at both ages.

EXPOSURES

We assessed frequency of cannabis use and cannabis dependence at ages 18, 21, 26, 32, and 38 years.

MAIN OUTCOMES AND MEASURES

We obtained laboratory measures of physical health (periodontal health, lung function, systemic inflammation, and metabolic health), as well as self-reported physical health, at ages 26 and 38 years.

RESULTS

The 1037 study participants were 51.6% male (n = 535). Of these, 484 had ever used tobacco daily and 675 had ever used cannabis. Cannabis use was associated with poorer periodontal health at age 38 years and within-individual decline in periodontal health from ages 26 to 38 years. For example, cannabis joint-years from ages 18 to 38 years was associated with poorer periodontal health at age 38 years, even after controlling for tobacco pack-years ($\beta = 0.12$; 95% CI, 0.05-0.18; $P < .001$). Additionally, cannabis joint-years from ages 26 to 38 years was associated with poorer periodontal health at age 38 years, even after accounting for periodontal health at age 26 years and tobacco pack-years ($\beta = 0.10$; 95% CI, 0.05-0.16; $P < .001$). However, cannabis use was unrelated to other physical health problems. Unlike cannabis use, tobacco use was associated with worse lung function, systemic inflammation, and metabolic health at age 38 years, as well as within-individual decline in health from ages 26 to 38 years.

CONCLUSIONS AND RELEVANCE

Cannabis use for up to 20 years is associated with periodontal disease but is not associated with other physical health problems in early midlife.

Click [here](#) to view the online article



Meet NDB's Dental Director Patricia Steiner, DMD. Currently a Dental Quality Alliance Ambassador, Certified Dental Consultant and member of the American Dental Association, Nevada Dental Association and Southern Nevada Dental Society, Dr. Steiner is using her 17 years of experience in the healthcare industry to provide valuable tips as our resident dental expert.

A DENTAL CONSULTANT'S PERSPECTIVE

Would a crown (D2750) on either of these teeth be a covered benefit?

What do you think? It seems like a simple enough question, but it's really just the first in a series of questions a dental consultant has to try and answer with the information provided by the treating dentist. Is the treatment that was performed or that is planned covered under the plan guidelines? Is the radiograph and the CDT codes submitted enough to make that determination? We have an obligation to our clients to verify the care delivered to members is appropriate, necessary and within the guidelines of the plan.

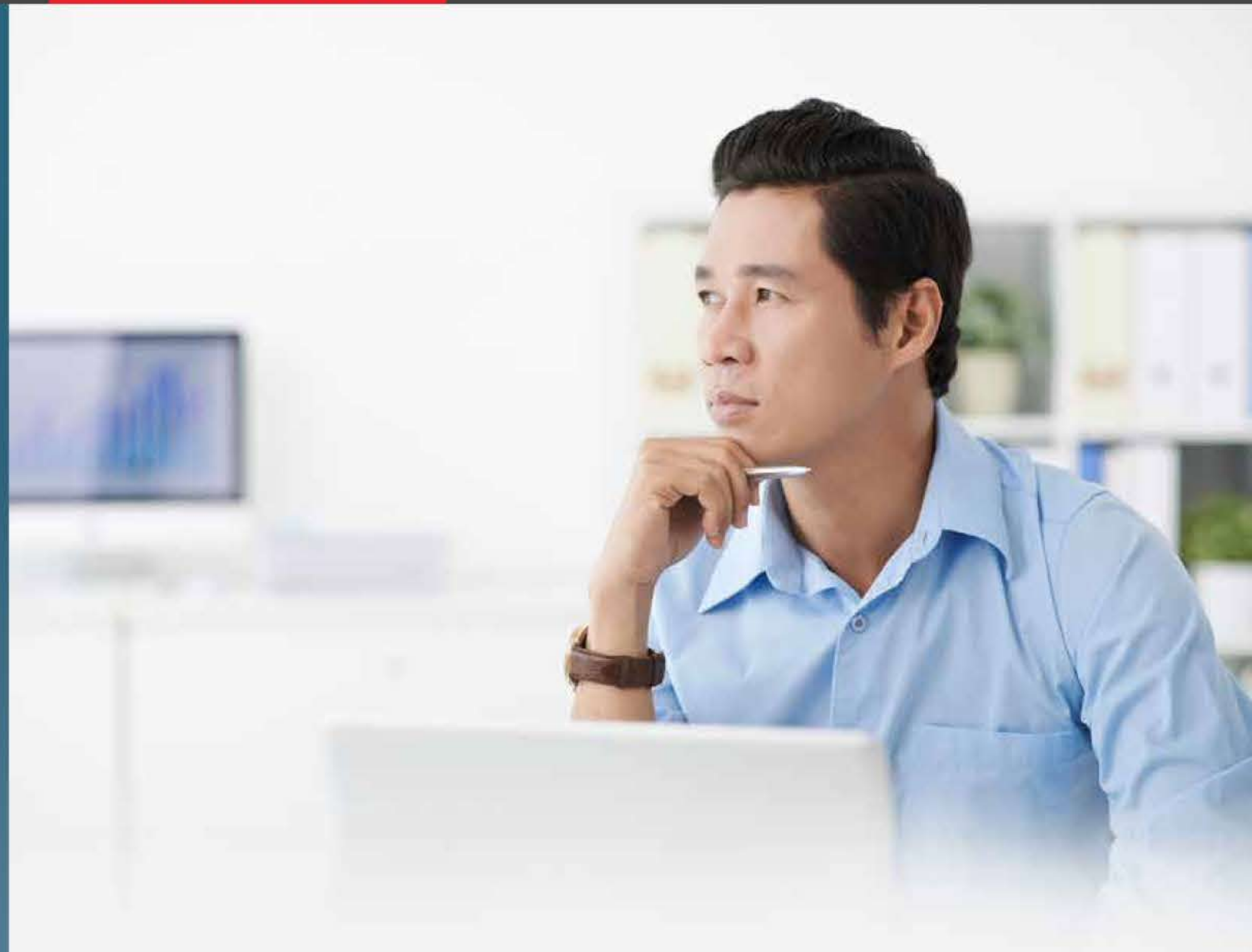
A consultant evaluates the treatment from two perspectives. The clinical perspective must answer questions such as: What is the diagnosis? Is the treatment appropriate for the diagnosis? Will this treatment be successful? Is there treatment required that is not present on the claim or authorization form? Has this treatment been done or is it also planned? These are the same types of questions you are answering as you develop a treatment plan for a patient. Does the information that you submitted provide the answers the consultant will need to make the same determination you did when prescribing the treatment?

The benefit perspective looks at benefit guidelines according to the plan. Is the treatment code a covered benefit? If the code is a covered benefit, under what circumstances is it covered? Is the treatment preventive, restorative, or cosmetic in nature? Are there alternative treatment options? For example, a plan may only allow benefits for a crown when a tooth cannot be restored with a direct restoration.

Just as you take great care in assessing, diagnosing and creating a comprehensive treatment plan for your patient, our consultants give great consideration when reviewing the information you have provided. Answering the questions necessary to make a benefit determination can often be a challenge and the review becomes more difficult and even impossible when poor quality records are submitted. Take another look at the documents you are submitting and ask yourself, if you can answer all of the questions with the information you are providing.



Non-Diagnostic Radiographs Submitted for Review



Fred Horowitz, DMD

A comprehensive, retrospective, literature study by Keith Yohn, DDS, MS, Associate Professor in the Division of Prosthodontics at the University of Michigan School of Dentistry produced no compelling evidence that the use of the facebow transfer in fabricating dentures or planning orthognathic surgery produced any superior results than not using this 133-year-old technology. His conclusion states "...oral surgeons and prosthodontists do not need to use a face bow in making their prostheses, fabricating occlusal bite splints, or planning orthognathic surgery." Many dentists have already abandoned the use of the facebow in clinical practice, and this study supports that position.

Complete original article: "Journal of the American Dental Association", June 2016, "The face bow is irrelevant for making prosthese and planning orthognathic surgery", Keith Yohn, DDS, MS.

Tammy Ishibashi | Professional Relations

Our PrimeTime featured dentist this month is Dr. Olya Banchik. Dr. Banchik is a graduate of New York University with two practices in Las Vegas: Hillcrest Dental and Eastern Hills Dental. She is also the founder of the "Smiles for Survivors Foundation", a non-profit organization that helps financially compromised breast cancer patients receive necessary dental care by connecting them with dentists, specialists and other dental professionals in the Las Vegas area.

We thought it would be fun to get to know Dr. Banchik by conducting our own "oral exam" and asking her to answer a mix of questions about herself. She was kind enough to play along, so let's get started!



Q: Where is your favorite place to eat?

A: Vintner Grill.

Q: What's the most fun you've had this week?

A: With 3 kids at home, it's never a dull moment at my house! They always make me laugh.

Q: What's the last movie you saw?

A: American Sniper.

Q: What's your favorite food?

A: Sushi!

Q: How would you describe yourself in five words or less?

A: Dependable, Enthusiastic, Motivated, Caring.

Q: What subject would you most like to study?

A: I have always wanted to go to business school and get my MBA or take some business courses - we definitely did not get enough of those in dental school!

Q: What would be your perfect pet?

A: Something super small, that doesn't shed, bark, or smell.

Q: Where would you love to live?

A: Somewhere surrounded by green hills and blue lakes with clear water.

Q: What is your favorite book?

A: There are so many! But right now I am reading City of Women by David Gillham about Berlin during the Second World War.

Q: What hobbies do you have?

A: I love to organize. It sounds funny, but it is probably my favorite thing to do. There is nothing that's more therapeutic than having an immaculate house and office!

Q: How do you spend your free time?

A: I spend time with my family. Unfortunately, between work and the kids' activities there is not a whole lot of free time available, so we do what we can.

Q: What are your interests outside of work?

A: I love to build and remodel, design spaces. I really enjoy designing layouts, whether it's for our house or office - it's a lot of fun.

Q: If you weren't a dentist, what would you like to be?

A: I would be a dermatologist, or a professional organizer (or both!).

Q: What is the most adventurous thing you've ever done?

A: White water rafting!

Q: What is your favorite song?

A: There are so many, but I just recently heard Frank Sinatra's "My Way" and for some reason it has stuck with me for the past few weeks. It's such a classic, and the words are so meaningful.

Q: What is an embarrassing moment you would like wiped from history?

A: Probably nothing that I would want to share publicly :):)

Q: What is one skill you wish you could master?

A: I wish I could speak French and Spanish fluently!

Q: What junk food can't you live without?

A: Nutella.

Well, there you have it! In just a few minutes we've learned that Dr. Banchik is a very bright, compassionate, sushi-loving and well-organized dentist that contributes to the great network of professionals that cares for our community. If you are interested in learning more about Smiles for Survivors, you can call Dr. Banchik at her office or the foundation: Office (702) 395-1088 Smiles for Survivors: (702) 475-5527.

If you know of a dentist that might like to be featured in one of our upcoming newsletters, please let us know. E-mail Tammy Ishibashi at tishibashi@nevadadentalbenefits.com.

PRIMECARE OFFICE OLYMPICS WITH BUCKY



The Rio Olympics may be over, but it's not too late to get the whole office involved in some friendly competition.

We launched the first annual PrimeCare Office Olympics in July. Check out some ideas the PrimeCare Fun Committee thought up. Maybe you can start your own Office Olympics!

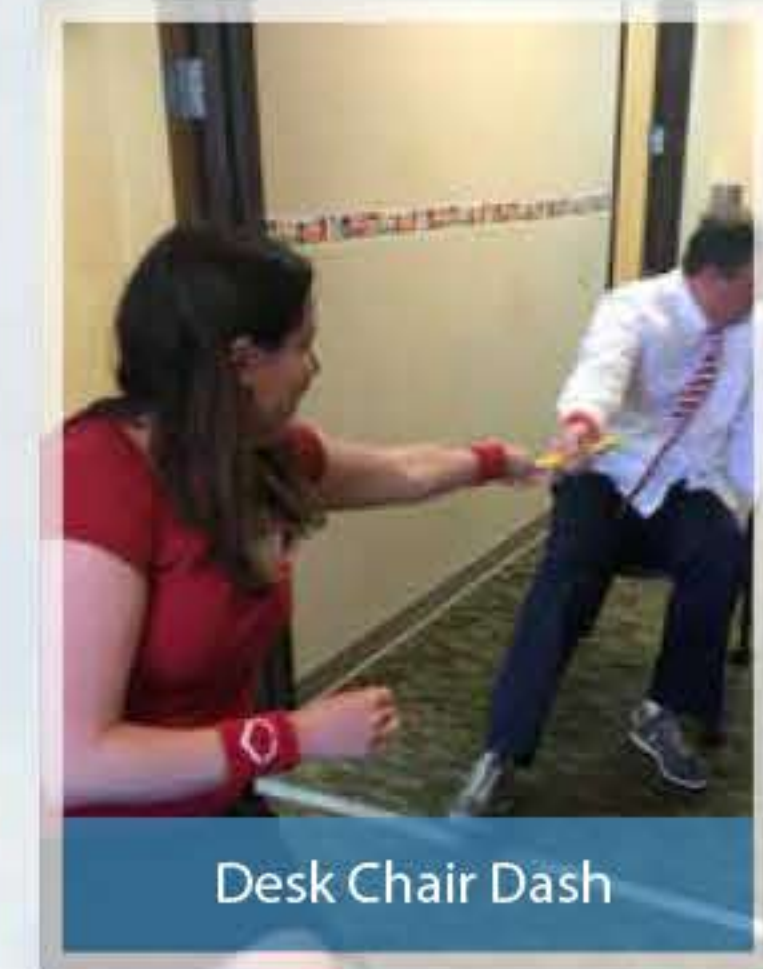
Don't forget your sponsors! The Fun Committee incorporated official 2016 Rio Olympics sponsors Chobani, McDonald's and Coca-Cola in the festivities.

OLYMPIC RACES CONQUERED

- ◆ Basketball
- ◆ Desk Chair Dash
- ◆ Finger Sprinting A.K.A Typing
- ◆ Mini Golf
- ◆ Rubberband Archery
- ◆ Staring Contest



Basketball



Desk Chair Dash



All Ties Were Settled By: Rock-Paper-Scissors



JOIN PRIMECARE ADMINISTRATORS

It's not too late to join the PrimeCare Administrators Network!

Your invitation already arrived at your office via USPS. Return your application with the prepaid envelope included or request an application on our website.

This is your chance to be part of a network of dental professionals partnering with the most reliable and valuable dental plan administrator.



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