

Delta Dental Of South Dakota Celebrates 50 Years Of Service By Giving Back

PIERRE — In celebration of its 50th anniversary, Delta Dental of South Dakota provided \$1,000 dollars to each employee and board member to give to a nonprofit organization of their choice through a project called "We Give."

Nearly \$90,000 was donated to 68 nonprofit organizations including the Boys and Girls Club of Yankton. "I chose this organization because they provide many services to area children," says a Delta Dental employee who chose the Boys & Girls Club of Yankton.

Delta Dental of South Dakota President and CEO, Scott Jones says, "We think the 'We Give' program is a wonderful way for Delta Dental to celebrate our employees' hard work, dedication and generous spirit."

The 'We Give' program is one way for Delta Dental of South Dakota's employees to celebrate a milestone and to also continue fulfilling Delta Dental's nonprofit mission in giving back to the communities they serve.

Donations were given to many other nonprofit organizations across South Dakota ranging from the Agar Fire Department to the Make-A-Wish® Foundation of South Dakota.



SUBMITTED PHOTO

Pictured are, from left: Jennifer Haberer, Crofton; Emily Conn, Yankton; Cheri Leader, Crofton; and Amber Hirsch, Yankton.

YMC Pharmacy Announces Board Certifications

Yankton Medical Clinic, P.C. and Yankton Medical Clinic Pharmacy are pleased to announce the recent Board Certification of Pharmacy Technicians Emily Conn, Jennifer Haberer, Amber Hirsch and Cheri Leader.

Each became Board Certified by passing a stringent examination given by the Pharmacy Technician Certification Board (PTCB). PTCB's certification program is the gold standard for certifying pharmacy

technicians. Since 1995 PTCB has developed, maintained, and administered a nationally accredited certification and recertification program for pharmacy technicians to enable the most effective support of pharmacists to advance patient safety.

Board Certified Pharmacy Technicians (CPHTs) work with pharmacists to run pharmacies smoothly and provide safe, effective patient care.

States Prepare To Launch Health Care Law

BY CHRISTINE VESTAL

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WASHINGTON — With the Affordable Care Act set to debut in January, state legislators debated dozens of measures related to the historic health care law — from overhauling insurance laws and designing health "exchanges," to shoring up anti-fraud protections and increasing the ranks of doctors and nurses.

On top of that, the politically volatile question of Medicaid expansion grabbed headlines, especially in the five states that still haven't decided whether to expand the program.

"It's been an IT undertaking of Manhattan Project proportions," says Matt Salo, director of the National Association of Medicaid Directors.

Salo was referring to the need to mesh Medicaid enrollment with the new health insurance exchanges, but he could have been talking about any of the dozens of technical and administrative changes state officials must make to prepare for the Affordable Care Act (ACA).

For example, state insurance regulators in nearly every state have been racing to approve hundreds of new insurance policies that will be offered on the exchanges starting Oct. 1. Meanwhile, the Medicaid expansion debate has highlighted long-standing problems with the federal-state health program for the poor, prompting many states to make changes.

Alabama Republican Rep. Greg Wren said the ACA "provided a real jolt to our governor and our legislative leadership to look at systemic reforms of our Medicaid program." The result, Wren said, was the state's first major Medicaid overhaul, designed to better coordinate patient care and reduce costs.

As of today, 21 states and the District of Columbia have decided to expand Medicaid. In at least five more states — Arizona, Florida, Michigan, New Hampshire and Ohio — governors support expansion but Republican-dominated legislatures continue to debate the issue. In Maine, Republican Gov. Paul LePage is threatening to veto an expansion passed by the majority Democratic legislature.

Under the current eligibility rules, Medicaid mostly covers pregnant women and young children, disabled adults and the elderly. Under the expansion envisioned in the ACA, it also will cover adults, many of them childless, between the ages of 18 and 65 with incomes up to 138 percent of the federal poverty line — about \$15,900 for an individual and \$32,500 for a family of four.

Many states plan to extend their use of managed care to cover these new adults, aiming to add more primary care providers to their existing networks of obstetricians, pediatricians and other specialists.

To boost the ranks of primary care providers, more than a dozen states enacted laws this year expanding the so-called "scope of practice" for nurse practitioners. These nurses with advanced degrees are trained to provide the same care as primary care doctors, but are prevented from doing so by state medical licensing restrictions. The new laws put nurse practitioners on an even footing with primary care doctors.

States also expanded licensing of retail health clinics, which typically see patients in drug stores or big-box retail stores, and enacted reciprocal licensing laws that allow doctors in neighboring states to care for out-of-state patients in rural areas through the use of telemedicine technology.

Even in states that choose not to broaden Medicaid under ACA, 2014 is likely to bring a substantial increase in state Medicaid rolls. The Congressional Budget Office predicts that millions of Americans who already qualify for Medicaid will enroll for the first time once national ad campaigns publicize the new health law's individual insurance requirement.

Texas, for example, has firmly opposed Medicaid expansion under the ACA, but the state is expecting 555,000 people to sign up for Medicaid in the next nine years, growth that may cost the state nearly \$4 billion.

Nationwide, the total cost of covering a projected 5.7 million people who are already eligible for the program but have never enrolled is estimated at \$68 billion for states and \$152 billion for the federal government, according to a study by the Kaiser Family Foundation and the Urban Institute.

Meanwhile, some GOP governors and lawmakers who are reluctant to expand Medicaid under the ACA are mulling alternative ways to expand coverage. One plan, referred to as "the Arkansas model," would cover newly eligible adults through private insurance policies available on the health insurance exchanges. But the federal government has yet to approve that approach.

Oz And Roizen | Healthlines Extra

7 Steps To A Heart-Healthy Life

BY MICHAEL ROIZEN, M.D., AND MEHMET OZ, M.D.
King Features Syndicate, Inc.

"A good head and a good heart are always a formidable combination," said a man who had both — Nelson Mandela. Well, here's the knowledge you need (a good head) to make sure your cardiovascular system (a good heart) stays healthy for decades more!

Unfortunately, ever more folks have high levels of lousy LDL cholesterol (more than 71 million North American adults), are overweight or obese (67 percent of adults) and have hypertension (33 percent of folks 20+). Almost 105 million have prediabetes or diabetes. These are huge risk factors for heart disease.

But you can defuse your potential heart problems. Here are our 7 Steps to Heart Health. They'll also improve your love life and brain function and reduce cancer risks.

1. Don't smoke and avoid secondhand smoke; people who do have 20 percent to 40 percent fewer heart events over two years.
2. Do whatever it takes to get your blood pressure to 115/75.
3. Keep your waist measurement to less than half your height.
4. Manage stress with meditation.
5. Adopt good heart/brain nutrition: Avoid saturated and trans fats, all added sugars and sugar syrups, and any grain that isn't 100 percent whole.
6. Get active: Your heart will love 10,000 steps daily; 30 minutes of resistance exercise weekly; 20 minutes of cardio three times a week.
7. Consider a supplement regimen: a statin and 200 mg CoQ10 daily, along with two baby aspirins with half a glass of warm water before and after (ask your doc); plus 1,000 IU of vitamin D-3 and 420 mg of purified omega-7 a day.

THIS IS YOUR MIGRAINE ON SEX

If you have a migraine, or you feel one coming on, you can reduce your discomfort by: a) taking a medication your doctor has prescribed; b) finding a cool, dark, quiet place to lie down until it passes; c) having sex (an orgasm is key); d) all of the above.

And the right answer is (drum roll, please) ... d) all of the above.

A: If you're a migraine sufferer, see a doctor — only about 50 percent of people who have these life-stopping headaches regularly do. Doctors may suggest a non-drug approach (relaxation therapy, stress-management and acupuncture are some). Botox, migraine relievers or preventive drugs and anti-nausea medications.

B: If you do sense a migraine coming on (you may experience an aura and feel dizzy, hear a ringing in your ears, have light sensitivity or even hallucinations) get thee to a cool, dark, quiet place. And that sets you up for our third suggestion!

C: New research finds that making love can be a more effective migraine reliever than painkillers (more than half of folks said it provided significant relief). The theory is that a rush of endorphins or the release of hormones that accompanies orgasm stabilizes or dilates blood vessels — easing discomfort or canceling out migraine pain.

If you're wondering how in the world to



OZ AND ROIZEN

Dr. Mehmet Oz and Dr. Michael Roizen

make love while you've got a migraine, think about certain Latin-sounding words that also refer to love-making ... and don't believe Bill Clinton's view on the subject.

For additional helpful tips, check out Sharecare.com's "Top 10 Social HealthMakers on Headaches."

TAKING THE BURN OUT OF HEARTBURN

"Doc, my heartburn is killing me," may be more on target than you know. A new study reveals that people with frequent heartburn, not just those suffering a severe problem with acid reflux called GERD (gastroesophageal reflux disease), are much more likely to develop throat cancer than folks who never have heartburn.

And problems with heartburn are spreading like wildfire, possibly because of increased obesity, diabetes and inactivity. A 2011 study of industrialized nations found that from 1997 to 2009, the number of folks who have heartburn at least once a week soared by 47 percent. So, here's what you can (and should) do to prevent heartburn before it gets the better of you.

1. Identify and avoid your heartburn triggers: Keep a food diary that tracks what you eat and when you get heartburn. One of the most common food triggers is fatty food. It causes your lower esophageal sphincter, the flap of tissue that keeps stomach acid in the stomach, to get lazy and loose, allowing acid into the esophagus. (Ouch!) Other frequent triggers: alcohol, citrus, chocolate, tomatoes and coffee.

2. Lose weight if you need to. Being overweight doubles your chance for heartburn. Losing 10 percent of your body weight can give heartburn the boot.

3. Exercise regularly. Physical activity helps your digestive system work better and promotes weight loss. So, get a pedometer and walk (a few steps more every day) until you're up to 10,000 steps daily. And go to Re-alage.com to enjoy our simple, effective and fun walking program.

KEEP THOSE HEALTHFUL FOODS HEALTHFUL

Great romances — "Phantom of the Opera," "The Hunchback of Notre Dame," "Wuthering Heights" — prove you can't always tell what's inside by looking at the packaging. But who thought that was true for coleslaw or a million other packaged "healthy" foods that fill grocery-store shelves?

Often these so-called healthy foods have as many calories and more sodium and sugar

than the standard versions. They can even block health-bestowing nutrients from getting into your body. Fat-free dressings are an example: They're lower in calories than dressings with heart-friendly canola or olive oil, but sometimes their ingredients prevent absorption of vitamins and minerals in fruits and vegetables. Another common mistake: You want to avoid dairy, so you opt for a flavored vanilla or chocolate almond milk and end up with 15 to 20 grams of sugar in a cup — as much as ice cream. Or, to avoid emulsifiers and additives, you get a standard brand peanut butter's "natural" version, but it contains saturated-fat-laden, inflammation-causing palm oil. Rule No. 1: Read the labels!

One more "healthy food" trap to be aware of: You think because it's "healthy" you can eat more, more, more. You end up shoveling in extra calories and heart- and brain-damaging salt and sweeteners! Follow portion-size recommendations — even with lower calorie and healthy foods. Your plate (9-inch diameter is a good size) should be two-thirds whole grains and vegetables; one-third protein (lean, skinless poultry or fish such as salmon and ocean trout, legumes and nuts). Fruit makes a great dessert!

FOODS THAT FIGHT CANCER

You may think parsley is a throwaway garnish (it's packed with goodness), celery is a snack that delivers fewer calories than it takes to digest (a myth!), and artichokes — well, as Steve Martin's romantically challenged Inspector Jacques Clouseau says in the 2006 remake of "Pink Panther": "A woman is like an artichoke, you must work hard to get to her heart." (Worth the effort — artichokes are packed with health benefits.)

But the real facts: The aforementioned three veggies, essentials of the Mediterranean Diet, are loaded with apigenin, an inflammation fighter that kills cancer cells. These foods can boost cancer treatments (some studies show it makes paclitaxel, used to treat certain breast cancers, more effective) or prevent cancer (breast, colon, skin, thyroid and leukemia) in the first place.

There are 50 to 75 TRILLION cells in the body, and inevitably some of them will become cancerous. But when your immune system can KO them, you'll never know or care that they were there.

Your diet is an important component of the ammunition you need for that battle, and apigenin is emerging as the toughest cancer fighter in the produce aisle. In addition to parsley, celery and artichokes, you'll find it in apples, cherries, grapes, chamomile tea and wine, and in herbs such as tarragon, cilantro, licorice, spearmint, basil and oregano.

Extra tip: Add physical exercise to be a true cancer warrior: One recent study found that among the most active men, longevity increases, the risk of prostate cancer decreases and lung and colorectal cancer rates drop by 68 percent and 38 percent respectively.

Mehmet Oz, M.D. is host of "The Dr. Oz Show," and Mike Roizen, M.D. is Chief Wellness Officer and Chair of Wellness Institute at Cleveland Clinic. To live your healthiest, visit sharecare.com.

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National Institutes Of Health Conference Set For S.F.

SIoux FALLS — The University of South Dakota Research Park will host the National Institutes of Health's 15th annual Small Business Innovation Research (SBIR) and Small Business Technology Transfer (STTR) Conference in Sioux Falls Oct. 28-30.

Approximately 500 attendees are expected at this national conference that focuses on the NIH's SBIR/STTR funding opportunities for small businesses seeking to commercialize health-related technologies. A committee representing several South Dakota universities and economic development groups worked together to attract the conference and is now, along with NIH, involved in planning and hosting the event.

"We appreciate the efforts of the South Dakota planning committee and are excited to be partnering with the University of South Dakota Research Park to hold this conference in Sioux Falls," said Matthew Portnoy, NIH SBIR/STTR Program Coordinator. "South Dakota and the surrounding states have growing medical industries and we look forward to sharing how NIH can partner

with small businesses to bring new products and technologies to market."

SBIR and STTR are programs of the U.S. Small Business Administration that provide research funding to small businesses interested in commercializing new technologies. The South Dakota SBIR office helps the state's small businesses seek SBIR and STTR funding from various federal agencies for technological innovation and to foster university-private sector partnerships. "This is a great opportunity for regional business to gain first hand knowledge of the SBIR/STTR funding process," added Gary Archambault, state SBIR Director.

The NIH SBIR/STTR conference will include more than 40 breakout sessions covering topics ranging from protecting intellectual property to creating university spinoff businesses. Attendees also have the opportunity to meet one-on-one with NIH program managers who oversee specific research areas such as cancer, diabetes, behavioral health and bioengineering. "This is significant opportunity

for South Dakota to highlight its growing medical research capacity and great economic climate to companies from across the United States," said USD President James W. Abbott. "These are exactly the types of activities we want to foster and support through the USD Research Park."

The final conference agenda is now being developed and registration for the conference will

open in June. For more information about the conference, contact Gary Archambault at (605) 367-5757 or Robert Vinson, Assistant Program Manager, NIH SBIR/STTR Programs, (301) 435-2713.

This project will not be funded in whole or in part with federal funds from NIH.

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Come join us in doing Boot Camp at midnight, Zumba at 1:00am, or Early morning stretches at 4:30am with breakfast at 5:00am. Bingo cards will be handed out so everyone can play and be a part of their own cancer prevention and win prizes!