

Letter of Agreement
Between Delta Dental Philanthropic Fund
And
Community Site Partner

This **LETTER OF AGREEMENT** is hereby made and entered into by and between the Delta Dental Philanthropic Fund (Delta Dental), sponsor of the Dakota Smiles Mobile Dental Program and the _____ to act as the community site partner to bring the Dakota Smiles program to _____ during the week(s) of _____, 2008.

AGREEMENTS:

Delta Dental agrees to:

1. Locate the Care Mobile or the Smile Mobile in the spot designated by the local site partner.
2. Provide oral health care and immunizations (as available) to the children identified by the site partner as possibly needing care.
3. Provide oral health education to patients.
4. Assist the site partner in promoting the Dakota Smiles Program visit to the community.
5. Maintain patient records.

Site Partner Agrees to:

1. Remit the \$2,500 per week site partner visit fee. An invoice will be sent to the site partner after the visit.
2. Ensure that physical site requirements for the units, as outlined, are met.
3. Correctly identify and refer eligible patients to the program.
4. Assist Dakota Smiles staff in handling patient registration as needed.
5. Assist Dakota Smiles staff in escorting children to/from the vehicle.
6. Adhere to the Health Information Privacy Policies & Procedures as outlined in the enclosed document.

If utilizing volunteers, Delta Dental strongly suggests that site partners check the list of sexual offenders on the Attorney General of South Dakota's web site:
<http://www.sor.sd.gov/mapsearch.asp?nav=8>.

SIGNED:

Delta Dental Philanthropic Fund

Site Partner Representative

Date

Date

(Please return agreement to Delta Dental Philanthropic Fund,
attn: Connie Halverson)

9/25/08