



North Dakota
DENTAL ASSOCIATION

Continuing Education Certificate

The North Dakota Dental Association hereby certifies that on **September 18, 2025**, **Rachael Buchwitz, RN** presented a continuing education course, "**Medicaid, What's New**" in **Fargo, North Dakota**. Attendees of the seminar had the opportunity to obtain **1 hour** in continuing education credits.



William Sherwin, NDDA Executive Director

Certification of Attendance

I, _____, hereby certify that I attended _____ hour of the
aforementioned continuing education course.