ODA TOGAY A publication of the Ohio Dental Association focusing on dentistry in Ohio

QuickBites

Plan ahead for the 2019 ODA Annual Session

Save the date: The 2019 ODA Annual Session is Oct. 3-6, 2019, in Columbus.

Register early: Register now and get full details at www.oda.org before prices go up! Plus, offices who register three staff members on one registration form will get the fourth staff registration free.

Book a room: This year, there will be NO events in the Hyatt Regency Hotel. Most activities will take place in the Greater Columbus Convention Center and the Hilton Columbus Downtown. Book a room in the ODA's hotel block at the Hilton by visiting https://aws.passkey.com/go/ODA19.

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ODA Day at the Statehouse makes positive impact on legislators

By Jackie Best Crowe ODA Managing Editor

About 125 dentists, dental residents, students and spouses met with their state senators and representatives at the 2019 Ohio Dental Association Day at the Statehouse on April 10, including about 20 dental students from The Ohio State University and Case Western Reserve University.

"The vast majority of our member dentists rank advocacy as one of the most important things that the ODA does," said ODA President Dr. Michael Halasz. "Well, on April 10 around 125 dentists and dental students hit the Ohio Senate and Ohio House to discuss two very important issues, dental therapists and the non-covered services issue. We had a lot of work to do since there are a lot of new faces in the state legislature. I think our message was well received and the initial feedback was very positive."

Day at the Statehouse is the ODA's most important grassroots advocacy initiative, where dentists have the opportunity to educate their legislators on issues important to dentistry. Attendees met with about 100 legislative offices during this year's event.

"Our members were definitely heard at Day at the Statehouse," said ODA Director of Le-



ODA Sta

ODA members meet with Ohio Rep. Darrell Kick (R-Loudonville) during the 2019 ODA Day at the

gal and Legislative Services Eric Richmond. "I was contacted by numerous legislators after the event who expressed their support of our issues and are interested in working with us during this General Assembly."

Before meeting with legislators, attendees had the opportunity to listen in on a conference call and attend legislative briefings where they learned details on the topics they

were asked to discuss with their legislators and tips on how to have these conversations.

Day at the Statehouse attendees spoke to their legislators about the dangers of creating a midlevel dental provider, or dental therapist, in Ohio. Outside interest groups have been pushing in Ohio for the creation of a

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Register this month for ODA Annual Session courses

By Jackie Best Crowe ODA Managing Editor

Course registration for the 2019 ODA Annual Session opens this month. To register and view a full list of courses and events, visit www.oda.org.

This year's Annual Session – Connect. Learn. Excel. – is Oct. 3-6 in Columbus and will feature nationally known speakers, a variety of CE for the entire dental team, an expansive Exhibit Hall and special events.

One of the highlights of this year's Annual Session is the Pankey Experience, where Pankey Institute faculty will come to Columbus and present 18 lectures and workshops.

"This is a rare opportunity for dentists in Ohio to experience Pankey Institute courses right in their own back yard," said Dr. Mark Bronson, 2019 Annual Session general chair.

ODA Annual Session also will feature the Madow Brothers, who are known for their entertaining, spontaneous style and content-packed programs, on Friday, Oct. 4, from 9 a.m. to noon and 2-5 p.m.

For those who missed Dr. Mark Murphy's shading workshop last year, he will be back this year presenting the course twice on Thursday, Oct. 3. Be sure to register early before spots begin to fill up.

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WHAT: 2019 ODA Annual Session

WHEN: Oct. 3-6, 2019

WHERE: The Greater Columbus Convention Center and

Hilton Columbus Downtown

REGISTER: www.oda.org



ODA Staff

The 2019 ODA Annual Session will feature nationally known speakers for the entire dental team. Register now at www.oda.org.





REGISTER NOW!
WWW.ODA.ORG



The Director's Chair

David J. Owsiany, JD ODA Executive Director

Dental specialty

Last month's column reviewed some recent developments related to dental specialty designation and advertising. I pointed out that in 2016, the Ohio State Dental Board changed its rules to clarify that dentists who meet the criteria for specialty status and hold themselves out as specialists do not have to limit their practice to performing only services related to the announced specialty. Similarly, that same year, the ADA changed its "Principles of Ethics and Code of Professional Conduct" also to make clear that it is not unethical for a dental specialist to advertise as a specialist while also providing services beyond just the specialty services.

In last month's column I also discussed recent challenges to certain states' dental ADA changed its process for recognizing dental specialties and certifying boards. Under the previous process, the ADA House of Delegates had final say over specialty recognition. In 2017, the ADA House of Delegates approved the creation of a new specialty recognition process by authorizing the formation of an independent commission called the National Commission on Recognition of Dental Specialties and Certifying Boards. ODA's Speaker of the House Dr. Denise Hering, a general dentist from Columbus, is serving as one of the founding commissioners of the new commission.

The new commission's specialty recognition process is grounded in objective standards that protect the public, nurture the art and science of dentistry and improve the quality of care. It is designed to reduce potential bias or conflicts of interest, or the perception of bias or conflicts of interest, in the decision-making process.

On March 11, the new commission adopted a resolution to recognize Dental Anesthesiology as the first new dental specialty since 1999, joining Dental Public Health, Endodontics, Oral and Maxil-Iofacial Pathology, Oral and Maxillofacial Radiology, Oral and Maxillofacial Surgery, Orthodontics and Dentofacial Orthopedics, Pediatric Dentistry, Periodontics, and Prosthodontics.

Here in Ohio, the Ohio State Dental Board has been working for more than two years to update Ohio's regulations related to specialty recognition and advertising. In 2017, the Ohio State Dental Board created the Ohio Specialties Education Advisory Group, which consisted of three dental board members, including the public member, the Dean of the Ohio State University College of Dentistry, and representatives from various dental-related organizations, including Case Western Reserve University School of Dental Medicine, the American Board of Dental Specialties, the Ohio Dental Association, the American Society of Dentist Anesthesiologists, and the Commission on Dental Accreditation, which is recognized by the U.S. Department of Education for accrediting advanced dental education programs in the United States. This group met to consider various alternatives and make recommendations to the full board. The Ohio State Dental Board also received input from other interested parties throughout its deliberative process.

In March of 2018, the Ohio State Dental Board passed a motion to "temporarily suspend the enforcement of the Board's specialty designation and advertising rules" until the Board updates those rules.

In the spring of 2018, the Ohio Dental Association commissioned an objective survey of Ohio adults. The survey was conducted by Saperstein Associates Survey Research Firm and was guided by an interest in more fully understanding (1) how

See SPECIALTY, page 11

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Jackie Best Crowe ODA Today Managing Editor

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The Ohio Dental Association, although

update, part 2

specialty advertising rules and that the

Michael Halasz, DDS

ODA President

They're onto

something!

President's

Message



Dr. Michael Halasz, ODA president, recently filmed a scene in his office for a horror/fantasy

A couple months ago, I did something I've never done before. I auditioned to be in a movie, and I got the part. It's a lowbudget horror/fantasy called "The Color of the Sun." (Starring KateLynn Newberry, written and directed by Clint Bramlette.) It's about a young lady and her father who become infected with a man-made virus that causes behavioral changes when the color yellow is seen. At one point in the movie, the main character gets a toothache and is forced to see the dentist. So, as you probably guessed, I am playing myself. The scene was even shot in my office. The experience was great. I had never acted before and the entire crew and cast were very patient with me. Even though I'm not ready to hang up the hand-piece and move to Hollywood,

So hang with me for half a paragraph. We all have heard and seen the complaints about millennials. They're lazy. They're demanding and impatient. They constantly need positive reinforcement. They have no respect for elders, title or authority. I could keep going. Yet, while the millennials might argue the validity of those accusations, they seem to have gotten something right ... they are all about "experiences" and not about the "stuff." (There ya' go. I brought it together.) Millennials are being raised in a world where they're exposed to more information than ever before. With the ability to look up anything with a cell phone, they don't have to take anything at face value.

it made me realize how important it is to

experience new things.

For example, the media may influence us that buying things will make us happier, but a simple look at the facts shows us that isn't the case, and millennials have figured that out.

"Ownership" just doesn't matter to most millennials. The largest retail store. Amazon, doesn't actually own any items. The largest transportation service, Uber, doesn't own any vehicles. The most popular hotel chain, AirBnB, doesn't own any hotels. See where I'm going here? Why own a car when there is a service that, on demand, will pick you up and take you where you need to go? The cost is essentially the same as owning a car, but you have none of the hassles. In addition, millennials are changing jobs, on average, every three years. Why imprison yourself to a mortgage and stay in one place when you don't know how long you will even be staying there?

Even the "science of happiness" tells us that experiences simply make us happier than buying stuff. Dr. Thomas Gilovich, chair of Psychology at Cornell University, says, "Our experiences are a bigger part of ourselves than our material goods. You can really like your material stuff. You can even think that part of your identity is connected to those things, but

nonetheless, they remain separate from you. In contrast, your experiences really are part of you. We are the sum total of our experiences." It makes sense. Would people rather hear about the new golf clubs you bought or the trip you took to Scotland to play The Old Course at St. Andrews? Most people don't care about the new Rolex Submariner dive-watch you bought. But if you tell them about the scuba diving adventure you had in the Great Barrier Reef, they're all ears. You get the point.

Another piece to this puzzle is how millennials define success. Before this generation, being successful was centered around prosperity and stability. Given that a significant percentage of millennials would take a pay cut to work for a company that matches their values, this is no longer the case. Being successful to a millennial isn't about how much money you make but how much freedom you have. Flexible schedules with the freedom to work from anywhere is much more appealing to most millennials than a high paying job that has strict hours and requires 8 hours in an office every day. It seems that the freedom coupled with

See MOVIE, page 13



Legal **Briefs**

Eric S. Richmond, Esq. ODA Director of Legal & Legislative Services

Embezzlement is a crime of opportunity, and it happens because it can. It is impossible to know the exact prevalence of embezzlement in dental offices as much goes undetected and unreported, but studies indicate that at least one in three dentists will be embezzled throughout the life of the practice. Dentists are particularly susceptible to fraud and embezzlement as small business owners because they have a limited number of staff to segregate duties. Furthermore, many dentists choose to delegate the day-to-day operations to office staff and fail to adequately monitor employee activities, creating opportunities for them to commit fraud. Fortunately,

Preventing embezzlement in your dental office

and preserve the financial integrity of your practice by instituting a few simple controls and policies. The ADA, in its manual "Protecting Your Dental Office from Fraud and Embezzlement," recommends taking the following steps to protect your practice from embezzlement:

Screen prospective employees

Background checks - Background checks on prospective employees are a good tool to help minimize your exposure to embezzlement. Furthermore, background checks may limit your liability arising from claims of negligent hiring, which is a cause of action whereby a court may hold an employer responsible for injuries caused by one employee to other employees, patients and the public at large if the employer failed to make a reasonable inquiry into the employee's background. Lastly, background checks may decrease the likelihood of discipline-related problems at the office, as well as

- Credit checks You should also consider performing a credit check on any prospective employee who will have contact with the office finances, including handling large sums of money or exercising financial discretion. Credit checks reveal the applicant's work history, debts and other monetary-related records.
- Drug testing Drug testing is another option you may wish to consider in the hiring process, as these tests may help identify individuals who are dependent on alcohol and drugs.

Policies and procedures in day-today operations

- Set a good example It is amazing how employees notice every action of the owner of a business.
- Educate employees Employees need to know that fraud will not be tolerated, the consequences of being caught and the damaging effects of embezzlement on the entire dental practice.
- Office policy Require employees

- to acknowledge in writing that they have read and agree to comply with all office policies.
- Fair treatment Treat employees well and give them a fair, competitive salary. Low employee morale creates a fertile atmosphere for fraud.
- Reporting program Establish procedures for employees to confidently report suspicious behavior.
- Use a lock and key A practical, affordable way to protect valuable office resources such as blank checks, receipts, prescription pads and accounting records is to lock them up. Only allow trusted employees access during office hours.

Create a climate of accountability

- Monitoring system Employees need to understand their job responsibilities and feel they are trusted. However, the U.S. Justice Department estimates that as many as 80% of the nation's employees will steal from their place of employment when no active monitoring system is in effect. Embezzlement is generally defined as "the intentional and fraudulent taking of another person's property by one who has been entrusted with the property for his/her or another's own use." What makes embezzlement different from ordinary theft is that the embezzler is, by definition, someone you trust, such as an office manager, supervisor or some other employee. Therefore, it is important to openly and randomly monitor employee activity. It is also important to consistently enforce your office policies.
- Discipline policy Your employee office manual should clearly state which internal steps, up to and including termination, will be taken if an employee is caught stealing or committing fraud in any way, manner or form. You should also disseminate a strong policy denouncing any employee theft or fraud and declaring the practice's intention to pursue such offenses, both criminally and civilly, to the fullest extent of the law. You should also have written policies on ethical behavior signed by all employees.

Install a system of checks and balances

- Separation of employee duties -Responsibility for all aspects of cash management should be assigned to different staff members, where possible. For example, the person responsible for reconciling bank balances to account balances should not be assigned functions relating to receipt or disbursement of cash or preparation or approval of payment vouchers.
- Rotate personnel Rotate those who handle cash transactions and crosstrain employees.
- Require vacations At least one full week every year and not just when the dentist is on vacation. During that vacation time, have another employee perform the work of the absent employee.
- Monitor suspicious behavior Be aware of an employee who is overly protective of day sheets, ledgers, or computer records or who volunteers too eagerly and protectively to open mail and go to the bank.
- Cash controls Closely monitor accounts paid with cash and make deposits daily.



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NW Dayton: Grossing \$330K per year on 2 days/week. 1300 active patients, 30 new patients/month.



Dr. Jan Labeda has acquired and merged the practice of Dr. Thomas Lustenberger in Batavia, Ohio.

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#ToothParty

2019 ODA Day at the Statehouse: About 125 dentists, dental residents, students and spouses met with their state senators and representatives on April 10, including about 20 dental students. Attendees educated their legislators about the dangers of a midlevel dental provider and spoke in support of creating legislation that would prohibit insurance companies from setting fees for services they do not cover.

2019 ADA National Dentist and Student Lobby Day: About 40 dentists and dental students from Ohio met with their legislators in D.C. in April. They asked their legislators to repeal of the McCarren-Ferguson Act for health insurance companies. Doing so would prohibit health insurance companies from colluding on prices without regulatory oversight from the Federal Trade Commission or the Department of Justice. They also spoke to their legislators about The ELSA (Ensuring Lasting Smiles Act), which would require insurance companies to cover medically necessary services resulting from a congenital abnormality, such as services to fix cleft lip or palate issues. Lastly, attendees asked their legislators to reauthorize the Higher Education Act to lessen the burden of student debt in America.



About 40 dentists and dental students attended the 2019 ADA National Dentist and Student Lobby Day in Washington, D.C.

ODA members and a dental student meet with Ohio Rep. Anthony DeVitis (R-Green) during ODA Day at the Statehouse.



ODA members meet with Ohio Sen. Theresa Gavarone (R-Bowling Green) during ODA Day at the Statehouse

Interested in advocating on dentistry's behalf? Want to make a difference in the practice of dentistry?

Make an appointment with your local legislator to discuss the issues facing your profession. The ODA department of governmental affairs offers information tips on meeting with legislators.

Contact the ODA at (800) 282-1526 today to help voice dentistry's message at the Statehouse.

Thank you to all attendees who helped educated legislators at the ODA Day at the Statehouse and the ADA National Dentist and **Student Lobby Day!**



Submitted photo

ODA members and dental students meet with Rep. Warren Davidson (R-8th District) during ADA National Dentist and Student Lobby Day.



ODA President Dr. Michael Halasz along with other ODA members meet with a legislative aide during ODA Day at the Statehouse.

The annual ODA Foundation raffle is one of the primary sources of funding for oral health-related grants and scholarships. Raffle tickets are \$100 each, two for \$175 or six for \$500, and only 700 will be sold.

This year's raffle prizes are:

- Winner's choice of a lease on a 2019 Mercedes GLC300 SUV or \$20,000 cash (lease terms established by Crown Mercedes)
 - Tripartite membership dues or \$1,500 cash
 - Piece of fine jewelry valued at \$1,000 from Laudick's

The drawing will be held Oct. 5 in the ODA Annual Session Exhibit Hall.

Tickets purchased before Aug. 23 will be entered into an additional Early Bird Drawing for \$500 cash on Aug. 30. Winners need not be present to win.

For more information about the raffle and how to purchase tickets, visit oda.org/community-involvement/oda-foundation/odaf-raffle/.

Apply for a scholarship or grant from the ODA Foundation

Applications for the ODA Foundation's 2019 scholarships and grants are now open. Available scholarship opportunities for 2019 include:

- Dental Student Scholarship for dental students who are Ohio residents, members of ASDA and who will be D2s, D3s and D4s in Fall 2019.
- Mercer Leadership Scholarship for OSU dental students entering their D4 year in Fall 2019 who have been Ohio residents for at least five years, are members of ASDA and have a commitment to leadership in dental school and their community
- Community Dental Health Coordinator Scholarship for individuals applying to a CDHC program who currently are employed by Ohio oral health related organizations.

The deadline for all scholarship applications is June 26.

The ODA Foundation also offers Access to Dental Care Grants for Ohio-based oral health-related programs that reach out to the underserved. Applicants must be 501(c)3 organizations in Ohio. The application process is a two-step process with a letter of inquiry due by May 22 and the grant proposal due by June 12.

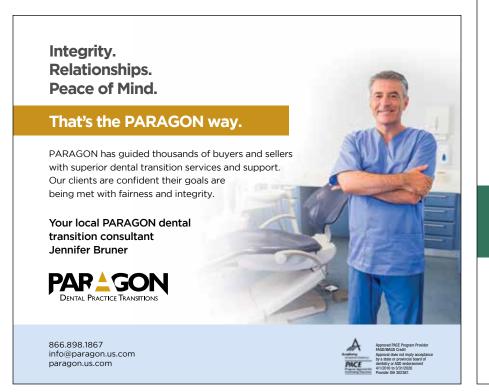
Scholarship and grant application packets can be downloaded at www.oda.org/community-involvement/oda-foundation/odaf-grants-and-scholarships/.

STATEHOUSE, from page 1

dental therapist, who would receive just three years of post-high school training and would then be able to perform a broad range of dental services without a dentist ever being physically present. Those services include diagnosis and treatment planning and irreversible surgical procedures such as the cutting of tooth structure with a high speed drill, extractions and restorations. The Ohio Dental Association opposes this proposal because it presents an unnecessary risk to the health of vulnerable dental patients and is a diversion of scarce resources that are better utilized supporting programs proven to improve access to dental care.

Attendees also spoke to their legislators about prohibiting dental insurance plans from setting the fees for dental services the insurance company does not cover for the enrollee.





ODA Meeting & Event Calendar



1 Dental Education and Licensure Committee

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- 9 Executive Committee
- 9-10 ODA Foundation
 - 17 Council on Membership Services
 - 27 ODA closed for holiday



- 6-7 Annual Session Committee
- 17 Subcouncil on New Dentists (call)

Download and print employment posters online

ODA members can download and print employment posters from the ODA's website for free. All employers are required to post numerous employment posters in their offices. To download the posters, visit oda.org/member-resources/employment-posters/. These posters are only available to ODA members.

EMBEZZLE, from page 3

- Check controls Sign all of your own checks; a signature stamp invites theft.
 If someone other than the dentist has authority to sign checks, require two signatures. Do not sign blank checks.
- Divide bookkeeping responsibilities For example, check disbursements should never be prepared by the bookkeeper. Or, within the accounts receivable function, have one person write deposit slips for checks, but have another person take deposits with slips to the bank. Cross-train these positions, and shift responsibilities from time to time. If doing so is not possible in your office due to the size of your staff, consider using a part-time outside bookkeeper to handle some of these responsibilities.
- Monthly reconciliation Perform a monthly reconciliation of the bank balance to assure recognition of all items recorded in the accounts.

There is no solution, of course, that can absolutely guarantee embezzlement does not take place in your practice. However, the steps mentioned above can help protect your practice by making embezzlement more difficult and allowing you to detect it more quickly when it occurs. For additional information on preventing embezzlement, talk to your personal attorney or accountant or contact the ODA legal department at (800) 282-1526.

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Dental Insurance Corner

Help with dental insurance is just a click, email or phone call away, part 2

By Christopher Moore, MA
ODA Director of Dental Services

Last month's column focused on the dental insurance resources that are available to Ohio Dental Association member dentists via the ODA. In this month's issue, we'll take a look at the many resources that the American Dental Association has to help members with third party payment issues.

Third party payer advocacy and individual assistance

Like the ODA, the ADA provides assistance to individual member dentists via the Third Party Payer Concierge. The Third Party Payer Concierge provides one-on-one support to member dentists as they deal with third party payer, participating provider contracts, insurance coding, processing policies, claims denials and appeals and other dental plan issues. To access an expert at the Third Party Payer Concierge, member dentists simply need to call the ADA at 800-621-8099 or email benefit questions to dentalbenefits@ada.org and coding questions to dentalcode@ ada.org.

Procedure codes

The ADA is responsible for the initial development, and continuing updating of, a tool that dentists use every day in their practice – the dental procedure

codes.

The Code on Dental Procedures and Nomenclature (CDT Code) was first developed by the ADA and published in 1969. It was developed to give the profession a uniform, consistent and specific means of accurately documenting, reporting and communicating dental treatment. The CDT Code has since gained wide acceptance and use by dentists and third party payers. So much so that in 2000 the federal government designated the CDT Code as a HIPAA standard code set. This designation effectively requires that any electronically submitted claim (and for all practical purposes, all paper claims) utilize the dental procedure codes from the version of the CDT Code in effect on the date of service

The standardized paper dental claim form as designated by the Ohio Department of Insurance for use in Ohio was also developed by the ADA. Thanks to the ADA, the data content elements of the paper dental claim form mirror those of the electronic claim.

Had the ADA not proactively developed the CDT Code and claim form, then dentists would have either floundered in their coding communications with third party payers or would have had to utilize codes and/or forms that were developed by forces from outside the dental profession.

The ADA is not static in its handling of the CDT Code though. Member dentists can get their coding questions answered at no charge by experts on the ADA staff by contacting either 800-621-8099 or dentalcode@ada.org.

The ADA also makes available for purchase the newest version of the CDT Code, the CDT 2019: Dental Procedure Codes, which took effect on Jan. 1, 2019. It contains 15 new and five revised procedure codes including delivery of non-opioid drugs for pain management, use of translation services and measuring and documenting glucose levels just prior to a procedure. Four codes have been deleted from the 2018 version.

The CDT 2019 may be acquired separately or as part of a kit with the "CDT 2019 Companion: Help Guide for the Dental Team." The "CDT 2019 Coding Companion" is an excellent resource that has been revised and updated in a format to assist new and experienced billing staff with how to code more accurately and efficiently and includes key coding concepts, scenarios and questions and answers. It also includes a section on the ICD-10-CM diagnostic codes.

Additional CDT Code information

including questions and answers may be accessed on the ADA website at https://success.ada.org/en/dental-benefits/frequently-asked-questions-regarding-dental-codes?utm_source=promospots&utm_content=dentalbenefitslp&utm_medium=leftnav&utm_campaign=easy and https://www.ada.org/en/publications/cdt/coding-education.

The ADA also enables individual dentists, in addition to representatives from dental specialty organizations and third-party payers, to have direct input into the CDT Code development process. The CDT Code is revised on an annual basis and dentists may submit change requests at any time. The date the ADA receives the submission determines which version of the CDT Code that the submission will be considered for. Dentists may obtain additional information about the CDT Code revision process via 1-800-621-8099, dentalcode@ada. org or by going to https://www.ada.org/

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ODA members who would like to submit a dental insurance related question, problem or concern may do so by sending the appropriate information to the ODA Dental Insurance Working Group, 1370 Dublin Road, Columbus, OH 43215, or 614-486-0381 FAX, or chrism@oda.org. To see past issues of the Dental Insurance Corner, visit www.oda.org/news and choose the category "ODA Today" and subcategory "Dental Insurance Corner."



Get smart health coverage with the ODA Wellness Trust, an ODA member benefit.



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Better Plans

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Better Service

Representatives can walk you through the various health care benefit options available and are licensed agents who are salary-based and do not make a commission on sales, so you can be assured they have your best interest at heart.

Contact ODASC to see how you can save time and money by simply being an ODA member!





INSURANCE, from page 6

en/publications/cdt/request-to-change-to-the-code.

The ADA also has dentists covered when it comes to use of the ICD-10-CM (International Classification of Diseases - 10th Edition - Clinical Modification). The ICD-10-CM are diagnostic codes that are utilized when submitting claims to medical benefit plans. While the ICD itself is maintained by agencies of the federal government, the ADA has resources to assist dentists in their use of frequently linked CDT Codes and ICD-10-CM diagnostic codes (https:// success.ada.org/en/dental-benefits/icdand-cdt-codes). The ADA also has for purchase the ICD-10-CM: Diagnoses for Dental Diseases and Conditions (https:// ebusiness.ada.org/productcatalog/product.aspx?ID=59927). This 66 page book distills nearly 70,000 ICD-10-CM codes to nearly 750 that apply to dentistry and thereby is a useful tool for dental practices that need to bill claims to their patients' medical benefits plans.

Dental insurance education and training assistance

The ADA has a landing page (ADA.org/dentalbenefits) on its website as part of the ADA Center for Professional Success

dedicated to dental benefits resources that can help member dentists address and resolve third party payer issues. There are 13 free of charge webinars available to member dentists that address third party payer issues (Third Party Payer Contract: The Most Important Decision; Advocacy and Third Party Issues; A Carrier's Perspective on Compliance Audits and Utilization Management; The Growing Impact of PPO Leasing on Your Dental Practice; Coordination of Benefits: The ABCs of COB; Coordinating Benefits: How Much of My Fee Should I Write-off?), coding (Coding for Prevention: A Primer on Procedures for Long-Term Oral Health) and dental benefits and payment (Locum Tenens Dentists: Opportunities Abound; Increase Value in your Practice! How? Start your own Dental Plan; Signing the Contract: Understanding PPOs; Trends in the Dental Benefits Market; Electronic Funds Transfer (EFT) Payments: Exploding the Myth and ERA/EFT Implementation: How to for your Practice). A free of charge podcast on PPOs, leased networks and their impact on a dental practice may also be accessed at https://success.ada. org/en/dental-benefits/ppos-leasednetworks-and-your-practice-the-impact.

The "ADA News" is published 22 times a year and covers breaking and important news for the country's dentists. Its stories

include coverage of dental insurance, dental benefits and third party payer issues and represent an important tool for dentists to use to stay on top of the issues impacting the profession and their individual practices.

Contract Analysis Service

The ADA created the Contract Analysis Service over 30 years ago within its Division of Legal Affairs to assist member dentists in making contracting decisions. It provides dentists with an understanding of the terms and obligations of contractual agreements with third party payers by taking contract legalese and translating it into easy to understand language. It also identifies potentially problematic contract provisions and their possible impact on the dental practice. This information can help the dentist either negotiate more favorable contract terms or at least have a fuller understanding of what to expect as a result of entering into the agreement.

To use this free service, members simply need to contact the ODA Department of Dental Services at (800) 282-1526 and request an analysis for whichever contract they are considering. If the contract has already been analyzed, then its analysis will be sent to the member at no charge. If the contract has not been previously submitted to the ODA for review, then the

dentist will be asked to send the ODA an unsigned copy of the contract. The ODA will then forward it to the ADA where the ADA's attorneys will analyze it. The ADA will return the completed analysis to the ODA which will then provide it to the member dentist, again at no charge. Additional information on the Contract Analysis Service and contracts may be obtained at ADA.org/contractanalysis and ADA.org/dentalplans, respectively.

Credentialing

The ADA and CAQH are working together to help streamline the credentialing process for dentists. They have developed a process via the ADA website (ADA.org/godigital) that "enables dentists to enter their professional and practice information one time in an easy-to-use, fast and protected digital platform." Once the dentist completes his/her profile, they can give dental plans and other participating organizations permission to access their data thus facilitating the credentialing process.

The service allows dentists to update their information at any time and sends quarterly reminders to users to review and, if necessary, update their information. It also prompts users if their licenses or other documentation are about to expire.

Additional information about the ADA credentialing service may be accessed at ADA.org/credentialing.

In-office dental plans or membership plans

In office dental plans (also called membership plans, dental membership savings plans or direct primary care agreements) work off the principle that for a monthly or annual fee, a patient gets a membership in a plan that affords him or her access to various free (e.g., preventive services) and/or discounted dental services in the dental practice that is selling the plan.

The ADA has developed a toolkit to assist member dentists in determining if an in office dental plan or membership plan is right for their practice. The toolkit "addresses common legal considerations and implementation steps, and includes checklists, a list of regulations by state, and a sample letter to introduce the program to patients. The toolkit also contains a calculator in Excel spreadsheet format to help predict the financial impact of adopting an in-office dental plan." Member dentists may access the toolkit online at https://success.ada.org/ en/dental-benefits/is-an-in-office-dentalplan-right-for-your-practice.

"The ADA has many resources that are available to member dentists at no charge," said Dr. Manny Chopra, chairman of the ODA Council on Dental Care Programs and Dental Practice. "I encourage all members to reach out to the ADA, ODA and/or their local dental society to utilize the many services and resources that organized dentistry has to offer."

The views expressed in the monthly columns of the "ODA Today" are solely those of the author(s) and do not necessarily represent the view of the Ohio Dental Association (ODA). The columns are intended to offer opinions, information and general guidance and should not be construed as legal advice or as an endorsement by the ODA. Dentists should always seek the advice of their own legal counsel regarding specific circumstances.





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Help build a strong profession for the future plus get a \$100 gift card

By ODA Staff

Dentist-to-dentist contact is the proven, most successful form of outreach to help build membership in organized dentistry, and active members know first-hand the value that membership provides.

Nearly 70% of dentists in Ohio are members of the ODA, and as the organization grows the ODA can offer stronger benefits plus have a stronger voice at the Statehouse.

"We know that dentist-to-dentist contact is the best way to recruit new members to organized dentistry, and a higher market share of members means a stronger organization for all of us," said Dr. Lori Fitzgerald, chair of the ODA Council on Membership Services. "If there is a dentist in your area who is not a member of the ODA, I encourage you to invite them to a local meeting and share with them what you value about your membership."

The ODA provides member dentists and local dental societies with resources to help with recruitment and retention efforts. To view these resources, visit www. oda.org and under "Member Resources"

Change of address?

Contact the ODA Membership Department if you have moved your home or practice, changed your phone number, changed your name or changed your email address.

Via email: membership@oda.org By phone: (800) 282-1526

member benefits

click on "Membership Recruitment and Retention."

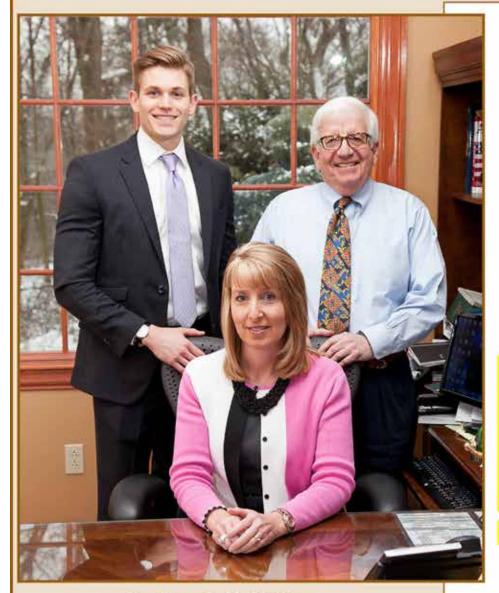
As an added bonus, the American Dental Association rewards dentists with a \$100 gift card for each new, active member they recruit (up to five members or \$500 in gift cards). Dentists may decline

the incentive and the ADA will contribute \$100 to the ADA Foundation. For full details on the ADA's Member Get A Member Campaign, visit ada.org/8185.aspx.

"Recruiting young members to organized dentistry remains to be the lifeline of the future of our organization," said Dr. Alex Mellion, chair of the ODA Subcouncil on New Dentists. "As an evolving organization we are continuing to come up with events, programs and tangible benefits

that appeal to all dentists and specifically young dentists. We have found that the needs and interests of young dentists do not always coincide with those of the more 'seasoned' members. As such, designing initiatives and events around how younger dentists enjoy spending time has allowed us to continue to cultivate relationships with nonmembers that now understand the importance of organized dentistry and become lifelong members."





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Why protect your income?

Submitted by Principal

You're working hard to prepare for the future. But how would your life change if you suddenly became too sick or hurt to work and your paycheck went away?

Take a minute to think about all the things your income provides. Your list might include supporting your family, saving for a college education and preparing for retirement. Those important financial goals won't just go away if you can't work because of an illness or injury.

And although you may not want to think about becoming sick or hurt, it happens more often than you think. That's why insuring your income could be one of the most important things you do. Because when it comes down to it, your ability to work and earn an income is the asset you rely on most.

Your lifetime income

Consider how your lifetime earnings compare to other things you're probably protecting with insurance – like your car and home. Your lifetime income is worth so much more, yet it often goes unprotected.

That's why many people consider individual disability insurance. It works differently than homeowners insurance, but the concept is similar. If you can't work and earn an income, it pays a monthly benefit directly to you, much like a "paycheck." That helps you pay everyday expenses — big and small.

If you've already got employer-provided benefits, such as group long-term disability insurance, that's a great start. But is it enough? In general, it covers about 60% of your gross income, or as little as 40% after taxes. That helps, but may not be enough for you to keep up your lifestyle and financial goals.

A separate individual disability insurance policy is a great way to fill potential gaps in protecting your income. It's one of the most common components of a strong financial plan because it's so important. Experts agree: That small investment today helps ensure you and your family are taken care of if the unexpected happens.

Please call the ODA at (800) 282-1526 or email insurance@oda.org to request additional information about disability income

Principal is endorsed by the Ohio Dental Association Services Corporation (ODASC). ODA members are eligible to receive a 10% discount when purchasing disability insurance through Principal.

Disability insurance has exclusions and limitations. For costs and complete details of the coverage, contact your Principal representative. Insurance issued by Principal Life Insurance Company, Des Moines, IA 50392.



Contact the Ohio Dental Association to request additional information about disability income!

Phone: (800) 282-1526 Email: insurance@oda.org Web: www.odasc.com



The Explorer

Matthew J. Messina, DDS Executive Editor

Evidence based practice

The profession of dentistry is committed to evidence-based practice, which integrates a practitioner's clinical expertise, the patient's needs and preferences, and the most current, clinically relevant evidence. However, there is an element in the media and on the internet that is quick to cast scorn on established and respected professions. They seek to tear down the level of trust that we have worked lifetimes to earn. The most recent effort in this regard relates to the accusation that there is not a solid base of scientific evidence for many of the beliefs that are central to the modern practice of dentistry.

The profession of dentistry has long advocated for twice yearly visits to the dentist. One recent article boldly proclaimed the accusation that the six month dental visit is financially motivated and only came from a Pepsodent toothpaste commercial from 1928. While that ad does exist, the marketing people at Pepsodent didn't just make that up out of thin air. As early as 1879, the American Academy of Dental Sciences wrote that twice yearly dental visits were beneficial. None other than the "Journal of the American

Medical Association" advocated for the same interval in the early 1900s. As scientific evidence and practical experience evolved, especially after the widespread use of fluoride in toothpaste and public water supplies starting in the early 1960s, the dental profession changed the recommendations. The ADA guidelines for exams and radiographs are continually updated to reflect current science. The firm six month recommendation has given way to a range that represents a commitment to individualized care. Different strokes for different folks. But the six month recommendation remains valid as a starting point for the average patient.

As an aside, guidelines are designed to reflect the needs of large population groups. However, no one person is average. The bell curve of patient experience, host resistance and personal commitment to care is wide and the modern practice of dentistry adapts to the needs of each individual patient. That is why each patient should have a dental home to determine their personal needs and recommend care to lead them to health.

Having been on the front lines of dealing with journalists when the "flossgate" issue broke two years ago, I have a personal understanding of the ongoing value of the scientific method in the practice of dentistry. While it's true that the peer-reviewed data on the value of flossing in preventing dental disease may not be as strong as we would like, we will never see the definitive study that some journalists are demanding. You see, to do a randomized clinical trial to determine the effectiveness of flossing on the prevention of interproximal decay and/or periodontal disease would require taking a patient population and denying them the ability to clean between their teeth during the study period. No Institutional Review Board (the ethical oversight committee at a research institution) would permit such a study. Because withholding flossing from the control group has the potential to cause irreversible damage to the patient, that study design would never be approved. As I told many reporters, there's no study to show that jumping out of an airplane with a parachute is safer than free fall, but I'll take the parachute every time – even without the hard evidence. After all, common sense is a form of retrospective study. We look at what happened in the past, figure out what went wrong, and decide not to do that again!

Our critics spend so much time focused on clinical research that they overlook one of the most valuable resources in clinical practice. Remember the valuable evidence that the patient brings to each encounter with their dental practice. We are individual healers and spend more quality time with our patients at each visit than many of our professional colleagues. I tell my students that "if you ask the right questions and listen long enough, the patient will tell you everything you need to know." When we take enough time to be present with the patient, we learn what's wrong and what matters to them. Skilled history-taking is one of the core skills of the dentist and is of profound importance in clinical decision-making. According to Nobel Peace Prize laureate Dr. Bernard Lown, medical history alone provides sufficient information in about 75% of patient encounters to make the diagnosis before performing a physical examination and additional tests. Additional studies by Hampton et.al. and Peterson et.al. agreed that the diagnosis made by using medical history alone was confirmed after testing in 66 of 80 new patients (82.5%) and in 76% of patient encounters respectively.

Please do not misunderstand me. I'm not against diagnostic testing. I'm for effective communication and active listening. If our journalist friends were truly interested in reducing the cost of medical care, they would applaud the dental profession for taking the time to listen and get to know people.

Scientific research is central to the profession, both from the standpoint of prevention of disease as well as the development of more effective, durable and esthetic materials for the restoration of the damage from dental disease. We are always seeking newer, better, more effective and more comfortable ways to confront disease. We have advocated for prevention and wellness far earlier and louder than other learned professions. No medical specialty has been more effective in putting ourselves out of business than dentistry!

I suppose that many of our long-held beliefs may lack a degree of the scientific rigor that we would prefer going forward, but we can certainly justify the past results we have achieved as a profession. If we look back only a couple of generations, most of our grandparents passed away in their 60s with their teeth in a glass beside their bed each night. Complete dentures were the norm. Our children take good teeth as a given. The American public expects to have their teeth for a lifetime, and we, as a profession, have made it possible for them to enjoy the use of the same molars that erupted at age 6 for more than 80 years, on average. That's a tremendous accomplishment in such a short time. The members of the dental profession have every reason to be proud. The evidence of our success in practice is right there for all to see!

Dr. Messina may be reached at docmessina87@gmail.com.



... Lots and lots of heart

You've worked on them for years! If you're lucky they'll give you a warning months in advance – but don't count on it. I even warned all of you about them a few years back. But now more often than not, one of them is standing at your front desk checkout counter – every day, telling your receptionist that they no longer are covered by any dental insurance plan and they're hoping they'll at least have Medicare coverage for their twice a year check-ups and cleanings.

If you're smart, you'll direct your staff to give these patients a courtesy discount right then and there because they've been your financial "gravy ticket" for more years than you can remember!

What these baby boomers aren't sharing with you and your staff is even more significant. Their treatment parameters have now changed ... and they're embarrassed to talk about it.

Income wise, the average boomer probably has slightly more than \$100K tucked away in a 401(k) and their Social Security benefit is just a bit over \$1,300/month (a spousal benefit will possibly add another \$800/month). Their return on that 401(k) money, when invested conservatively, could generate a 4% return (\$333/month) excluding any market appreciation/de-

preciation. This totals anywhere between \$1,600-\$2,400/month!

And there's one final boomer statistic I almost forgot. Each boomer should anticipate additional expenses dedicated to out of pocket (remaining lifetime) health care services not covered by Medicare (\$200K is the average dollar amount)!

I empathize with these fellow boomer(s) each time they don't accept my ideal treatment plan. One such example is the proposed treatment that calls for an implant/custom abutment/crown ... replacing a fractured to the gum-line upper lateral incisor (failed RCT/post/crown).

Understand, I'm not telling you to stop offering the best oral health treatment option. Nor should you assume what the financial status of your patients might be.

However, more often than not, be ready to present alternative treatments because half of your boomer patients now live with a strict budget etched in stone.

Since selling my practice in 2011 and now only working part time in both Southwestern Ohio and Central Kentucky, I've lost count of how many times I've been told — "Doc ... just take the tooth out! It doesn't show and I can't afford that treatment you just talked about."

For me, the answer to the above "lateral incisor" dilemma is cantilevering a pontic to a crown on the cuspid. If you remember, a cantilever bridge was one of the first types of fixed crown and bridge you were taught in dental school. Other than porcelain fracturing, I don't remember ever having a cuspid/lateral cantilever bridge fail!

Today, you have to gently "call out" your boomer patients. Force them to declare what their endpoint is when it comes to the loss of teeth. Do this by putting a hand mirror in their grasp and while they hold the mirror, you proceed to individually point to each tooth, forcing them to com-

mit to a "save" or "extract" treatment plan.

To combat boomer angst about fees, give them phased treatment options. Doing such will lessen sticker shock and produce more desired outcomes.

Along those lines, the fee(s) and inflexible payment terms for root canal treatment can often block acceptance vs. extraction for a boomer. Therefore, performing a pulpotomy shouldn't be discarded as an option of treatment. As long as the patient is free from pain and any overt signs of infection, why not nurse the patient along until the patient's ready to accept definitive RCT. Again, explain to them that ideally they should rid themselves of infection and that leaving them slide with a pulpotomy lessens the success of RCT.

It's not that your boomer patients don't have some wiggle room in their budget – they probably do. However, having

no third-party help results in budget unknowns at this particular moment. Let them go home and in their own calm environment, they'll sort out their options. Remember, these types of discretionary payments that weren't a financial problem just a few months or years ago – now are!

I know how hard it is for today's dentists to make a fair profit. Third-party payers will continue to grind their preferred providers into more financial conflicts. What I'm asking is not another concession on your part. Your boomers have been your practice's foundation because they've been your best paying customers for years. If you show them that you care — they'll return your kindness. PLEASE GIVE THEM A TINCTURE OF TIME AND PATIENCE and HEART ... LOTS AND LOTS OF HEART ...

Dr. Buchholz may be reached at rbuchh@windstream.net.



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How to find a job as a general dentist

If you are interested in finding a job with a dental corporation, look no further than the internet. Because dentists with multiple practices and dental companies have very good front-end management, their ads, along with the benefits package and compensation structure, will be easy to find and easy to apply for. Some even come with a sign-on bonus, usually paid at the end of a pre-defined term. These positions are typically open to new graduates and utilize regional recruiters. These jobs can be weighed against each other on the locations available, schedule, total compensation and overall philosophy on patient care. My suggestion is to make a spreadsheet where you list the potential

job opportunities, and then list factors (like location, compensation, overall vibe, etc.) giving each a rank from 1-5, and then also rank the factors 1-5 (overall vibe may be more important than location), add the numbers and choose the winner.

If you are interested in finding a position in private practice, it will require more work up front as most positions are not advertised online. Sometimes a private practice position will be advertised on the ODA Classifieds, but it may be in a discreet manner, and it is always helpful to contact the dentist through a mutual connection in addition to an online application. A general dentist in private practice may want to script how patients and team members are told about a transition and will want to make sure he or she is comfortable with the new associate first. hence the perceived secrecy. A position in private practice will usually come from an email or phone call, in-person meeting and some shadowing of the dental office to ensure a mutually good fit.

The best way to find an unadvertised position is through word of mouth. A mutual connection between you and the potential employer can email both of you and create a warm introduction, and you can take it from there. The benefit of a warm introduction is that the potential employer is encouraged to respond (the likeliness in response is directly cor-

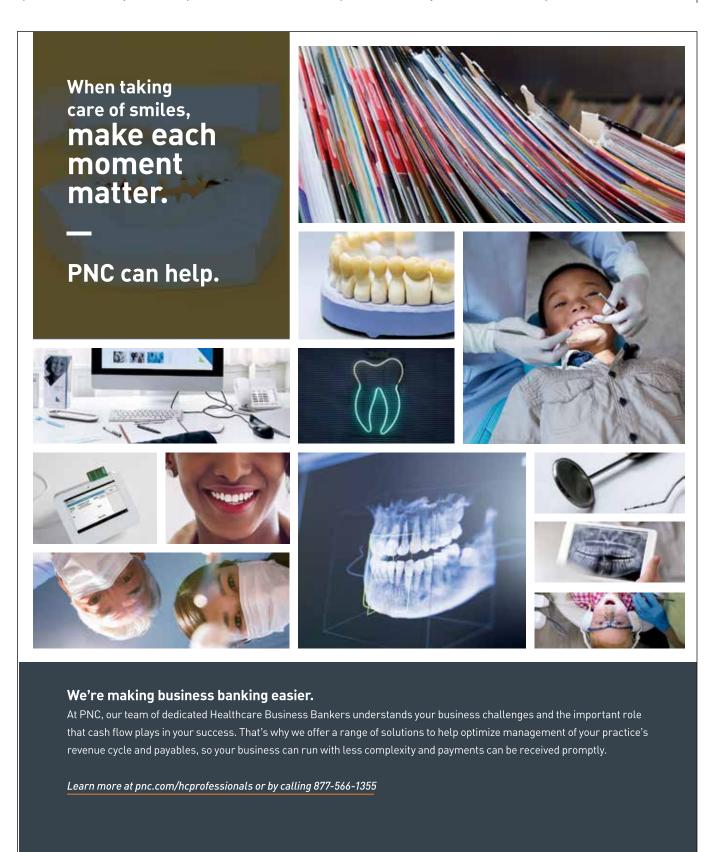
related with how well the potential employer and connection know each other). Examples of connections are members of your local dental society, members of study clubs you participate in, dental specialists, dental laboratory owners, dental accountants and dental supply company representatives. If you have a friend from dental school that practices in an area you want to move to, that friend could be a great connection as well!

The important thing to remember when you have a lead is that it might not go anywhere, and that's OK! You are working on building relationships, your professional network and learning what's available.

Remember:

- Word of mouth is the best approach.
- Build your network not only can your network help you find a new job but it can also help with referrals, continuing education, dental experiences/trips and other activities.
- Dentists are busy expect to not receive a reply after one email or voicemail – it may take a few touch points and that is normal.
- Don't give up!

Dr. Katsman may be reached at nkatsman@gmail.com.





SPECIALTY, from page 2

the public perceives the term "specialist" in dental advertising and (2) how the term "specialist" impacts the public's decisions involving dental care services, including which providers are chosen.

The survey results indicate that when a dentist advertises as a specialist in a certain area of dentistry (e.g., orthodontics, oral surgery, TMJ disorders/orofacial pain and implants), the public overwhelmingly believes that the dentist has completed an accredited postgraduate/residency program in that area of dentistry, in addition to dental school. This may be because in most of health care, completion of an accredited postgraduate residency program is required to attain specialist status in a particular discipline.

The survey results also reveal that the public tends to believe that a dentist who advertises as a specialist in a certain area of dentistry is more qualified in that area than a general dentist. A substantial majority of the respondents indicated that they were more likely to go to a dentist who advertised as a specialist than a general dentist for services related to the specified area of dentistry. However, at least seven out of 10 respondents were less likely to choose a dentist who advertised as a specialist if they learned that the dentist had not completed an accredited postgraduate residency program in the advertised area.

The survey results demonstrate that the use of the term "specialist" in advertising has a significant impact on consumer behavior. Consumers believe that dental specialists have completed accredited postgraduate/residency training programs after dental school and make decisions for care based on that belief. In May of 2018, Martin Saperstein, Ph.D., presented the results of the survey to the Ohio State Dental Board for its consideration in the context of its deliberations related to specialty advertising.

In July of 2018, the Ohio State Dental Board promulgated a series of new rules to update Ohio's specialty designation and advertising regulations. Among other things, the new rules would tie specialty status to completion of an accredited post graduate education or residency program. The proposed rules set the criteria for dental specialty status on a standard that is universally recognized in health care: completion of an accredited post-graduate/residency program.

The rules are narrowly tailored to allow dentists who complete an accredited residency program to advertise as a specialist while still allowing other dentists to advertise their various levels of training or education beyond dental school as long as they avoid claiming to be "specialists," which our survey reveals carries special weight and expectations with the public.

Dentists who advertise truthful certification, diplomate status or other credentials from a bonafide organization would be required to include a disclaimer stating that the organization does not meet the specialty requirements of the Ohio State Dental Board.

The proposed rules are not yet in effect as they are being reviewed by the state's Common Sense Initiative, which is charged with reviewing proposed rules to ensure they are consistent with clearly articulated state policy related to health, safety and consumer protection.

This column will keep readers updated on any future developments related to the Ohio State Dental Board's proposed new specialty rules.

Associate Wanted

Associate Dentist needed. Amazing opportunity. We are looking for a motivated associate dentist interested in working immediately full-time in our well established, busy, general, single location, private practice. The dentist hired will begin with an existing patient base. Great mentorship opportunity for new graduate or current practicing dentist who's selfmotivated and eager to grow their skills. We have a stable management team in place. Candidate should preferably be skilled with most procedures including but not limited to: restorations, endo, crown & bridge, extractions, and prosthodontics; preferably able to work well with children. Must possess passion, high ethics and morals. Candidate should be eager to grow skills with continued education. Credentials required: DEA license, OH DDS license, registered with ODA. Dental Philosophy: some of our team includes 3 dentists, 3 EFDAs, and 8 hygienists (who are able to anesthetize and work unsupervised). We are interested in growing our current specialties (molar endo, ortho, sedation, implants, etc.). Our world class office has been voted the #1 dental office in our county (Southwest OH), for the past 9 consecutive years! We have a respectable reputation for high quality and the friendliest staff around. Our facility is a must-see to believe! Technology: some of our technology includes: cone beam, digital radiography, large screen TVs in each op, and intraoral cameras. Business Systems: we do submit to all insurance companies; we only participate with 1 PPO. Our office was built in 2000 and is very clean, modern, and up to date. We pride ourselves with our organizational systems. Our office hours include early mornings, evenings and Saturdays. Our business practices and continual drive for excellence has allowed our practice the unique ability to remain recession-proof over many decades. All interested dentists should email their resume (include career goals) to: resume@bentleydds.com. We will reply to all those who may be a candidate. Those interested must be willing to take online assessments.

Associate Dentist wanted for a busy, well established practice in North Canton, Ohio. This is a full time position with a well-trained experienced staff. Great patient base, fully computerized office, including CAD CAM design. Practice is FFS only and compensation would be a guaranteed minimum plus production. To inquire call (330) 958-6390 or send CV to NorthCantonDDS@gmail.com.

Associate position: Dayton-Cincinnati area. Privately owned, growing family dental practice looking for an associate dentist 3 to 4 days/week. Located between the Dayton and Cincinnati area. We are seeking a long-term,

energetic, career-minded Dentist. The ideal candidate would be able to perform molar endodontics, implants, extractions, restorative dentistry, and feel comfortable working with children. Our treatment philosophy tends to be more on the conservative in nature, with the goal of helping patients achieve and keep good oral health, preventing dental emergencies, and establishing lifelong patients who trust and value our care. If interested in more information please email summit9600@gmail.com.

Associate position available in Kettering, Ohio 2 days per week. Opportunity to increase to 3-4 days per week. Please call Mr. Sullivan @ (937) 430-4317.

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Columbus: Dentist and Assistant for New Holistic Children's Private practice in New Albany. If you are into nutrition, organics and whole body health this would be perfect for you. Send resume and head shot photo to naadultdentistry@gmail. com. (614) 775-9300.

Dayton offices looking to add associate for our busy offices; please email resume to britetooth@hotmail.com.

Dentist-Health Services. Position summary: (Job Opening 447326) To diagnose and treat dental problems and to assist with supervision of the operations of the Nisonger Center McCampbell Hall dental care clinic. Review information provided by dental assistants and interview patients regarding oral-medical problems. Supervise dental assistants in preparing patients, and sterilizing and maintaining equipment. Review dental operations and recommend new methods and procedures to provide efficient dental care. Assist with the supervision of dental students rotating within the clinic. Assist with compliance activities to support a safe experience and environment for the patient. Education and experience: D.D.S. or D.M.D. degree and licensure to practice in the State of Ohio, required. Residency, or private practice experience and experience with patients with developmental and other disabilities desired. Requires successful completion of a background check. Qualified candidate may be requested to complete a pre-employment physical, including a drug screen.

https://wexnermedical.osu.edu/careers.

Dentist associate opportunity, full or part time. Generous compensation for the right candidate. Future partnership/ ownership possible. Residential suite adjacent to office is available. Practice located east of Cincinnati. Call Mr. Sullivan at (937) 430-4317.

Dentist needed – up to \$25,000 sign-on bonus! Our Dentists enjoy no weekends, no evenings, and summers off! Smile Programs is the nation's largest in school dental program, providing comprehensive care to children who would not receive dental care otherwise. For more info, contact Silvana Ayar at (586) 823-0037 or email sayar@mobiledentists.com.

Do what you do best - practice dentistry, while we take care of the rest. ImmediaDent is seeking Full Time and PRN Dentists with a passion to provide quality comprehensive dental care in our modern offices throughout Ohio, Indiana, and Kentucky. ImmediaDent offers all phases of general dentistry to a mix of new and existing patients on a scheduled and walk-in basis in all 25+ locations. The ideal dentist for ImmediaDent enjoys performing a variety of dental procedures and is experienced in all phases of general dentistry including oral surgery and endodontics; new graduates with great clinical skills are encouraged to apply. Relocation and Sign-on Bonus up to \$10k available for specific locations. To apply today, visit www.immediadentcareers. com or contact Chad Johnson at (913) 428-1679 or via email at chadjohnson@ immediadent.com to learn more.

Established Pediatric/Orthodontic/Sports Dentistry Practice in Findlay, Ohio. 2600 square feet, two story, stand-alone dental office in downtown area. Owner is looking for associate/associates transitioning to ownership. To inquire call (419) 348-9555 or E-mail: win58@woh.rr.com.

Full-time Associate Dentist for Cleveland general practice. Our well-established and growing private general practice in Westlake, a western suburb of Cleveland, has great new patient flow and seeks a full-time associate dentist to help us deliver exceptional dental care to our community. We are highly focused on quality dentistry and patient satisfaction. Looking for a motivated person with good clinical and communication skills. We have a great facility complimented by an amazing staff who understand and demonstrate outstanding patient care, teamwork and the business of running an efficient office. Email westcledin 18@ gmail.com your resume,cover letter and any other material you wish that will help us better know you as a dentist and potential team member.

Great Dentists Wanted – Montgomery, Shelby, Euclid, Macedonia & Dayton Ohio. Midwest Dental is seeking great dentists to lead our Merit Dental practices in several locations in Ohio. This position offers excellent compensation and benefits, a great work-life balance, and unlimited opportunity for professional development. Our support team handles the administrative details, allowing you to lead your team while focusing on dentistry. If you possess a passion for providing quality care and are looking for a rewarding career opportunity, please contact Rupesh Parikh at (614) 981-5992 or rparikh@midwest-dental.com.

Flexible Locum Tenens Opportunity. Midwest Dental is seeking experienced dentists to fill daily/weekly/monthly locum tenens needs to cover leaves and extended vacations. Perfect for dentists wanting to pick up extra hours. We offer competitive pay and give you complete freedom to work as many locum sessions as you'd like! May involve travel with overnight stays. Typically includes 32-36 hours/week when needed. Opportunities are available at practices across the country. Contact Stevie Morgan at (715) 225-9126 or smorgan@midwest-dental.

The LSS Health Center @ Faith Mission seeks a FT or PT dentist to provide oral healthcare & follow-up services to the patients in the health center. This is a multi-disciplinary team providing integrated patient care. Contact Tiffany Makley at (614) 224-6617 or tmakley@ Issnetworkofhope.org.

We're overwhelmed! Our five location multi-specialty group practice has grown to the point that we simply have too many patients. Our full time General Dentists are currently seeing 80+ new patients per month with an average annual income ranging from \$150,000 initially to \$300,000 for the more seasoned doctor. Our doctors providing specialty care are receiving significantly greater levels of compensation. Doctors receive an initial salary, incentives and a full benefit package while enjoying the freedom that our experienced management team provides. Enthusiastic, quality oriented professionals seeking independence, growth and financial stability may contact Dr. Michael Fuchs at (513) 505-9987, (513) 697-2640 or fdca1.jmf@gmail.com. Full or part time positions are available. No evenings after 7pm and no weekends. We very much look forward to speaking with you.

Equipment for Sale

Dental Chair, Unit, Light, very good condition, Adec, \$4500. Plus 1HP MDS Matrx vacuum system \$500. Pick up only. Email: craigcallendds@gmail.com. Mansfield, Ohio.

Intraoral X-Ray Sensor Repair/Sales. We repair broken sensors. Save thousands in replacement costs. Specializing in Kodak/Carestream, and major brands. We also buy/sell sensors. American SensorTech 919-229-0483 www.repairsensor.com.

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Profitable general dentistry practice for sale south of Cleveland with solid growth potential. Primarily fee for service; in network with only 3 private insurances. Average collections last 3 years \$435,000 based on 20-28 hour weeks. Hygiene 27% of total production. State of the art technologies and most current windows on new computers. 5 operatories with 6th operatory plumbed. Real estate negotiable. Contact Dr. Jennifer Stern, (614) 572-7228, jstern@ practicendeavors.com.

Well-established periodontal practice for sale in northern Ohio. Gross revenues consistently over \$1 million per year with less than a 60 percent overhead. Strong referral base. Great opportunity. Mustsee practice. Contact Dr. Corey Young at Omni Practice Group for more information Dryoung@omni-pg.com or (614) 450-0993. (OHD105)

Practice for sale, Washington C.H. 1000 square foot Dental Building with off street parking. Three equipped operatories, lab, and business office and private office. Includes all equipment, supplies, and patient records. For more information call (740) 335-3861.

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ODA Today Classified Advertising

Classified ads appear in each issue of ODA Today. The cost is \$55 for members (\$88 for non-members) for the first 40 words. Each additional word is \$1. Ads may be submitted via mail or fax to the attention of Amy Szmania, advertising manager, or by email to amy@oda.org. The deadline to place, cancel or modify classified ads is the 1st of the month prior to the month of publication.

ODA Classifieds can also be found online at http://www.oda.org.

REGISTER, from page 1

There will also be 18 hours of free CE available to dentists, including 10 in Ohio State Dental Board Category A and a free Medicaid course.

"We are excited to offer a variety of great courses to help dentists sharpen their skills and improve their practices," Bronson said. "We also have opportunities for front office staff, hygienists and assistants as well as team building courses for the entire offices. The ODA Annual Session Committee knows how important quality CE is to every dental practice."

In addition to these great CE opportunities, the ODA Annual Session is also home to the largest Exhibit Hall in the area with more than 200 companies showcasing their products and services.

On Thursday evening, be sure to attend Marketplace Mixer with the Madow Brothers in the Exhibit Hall, which will feature free appetizers. On Friday evening, stop by the Exhibit Hall for Sip and Shop, which will feature free

beer, wine and soft drinks, plus attendees can enter to win a \$2,000 Visa gift card (plus two runners-up will receive a \$500 Visa gift card). And Saturday will feature Grab a Bite, Grab a Deal! in the Exhibit Hall, where the first 250 people who stop by will get a \$10 food voucher to use inside the Exhibit Hall.

"Not only is our Exhibit Hall a great opportunity for dentists to comparison shop and try out new products they need in their office, but they can also enjoy our special events with their team and others from across the state," Bronson said.

This year, there will be NO events in the Hyatt Regency Hotel. Most activities will take place in the Greater Columbus Convention Center and the Hilton Columbus Downtown. Book a room in the ODA's hotel block at the Hilton by visiting https://aws.passkey. com/go/ODA19.

Register now and get full details at www.oda.org before prices go up! Plus, offices who register three staff members on one registration form will get the fourth staff registration free.

MOVIE, from page 2

not being tied down with the financial "burden" of ownership allows millennials the independence to travel and bank experiences that will help define who

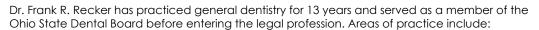
I really think the millennials are onto something. Being involved in the organized dentistry tripartite has allowed me to travel and see things and do things and meet people that I'm not sure I would have done on my own. I have friends and acquaintances from coast to coast. I have visited exotic places and tiny towns with more personality than I could have imagined. These memories will last forever, or at least until I get dementia. Contrast that with the fact that I have bought and sold two Harleys and a half dozen high end time-pieces which I really don't miss at all, although the Harleys were a lot of fun and I did experience some cool rides. As I get older, I really can appreciate what experiences can offer that stuff simply cannot. After all, seeing Eric Clapton from the front row is much more satisfying than the frustration of trying to play the guitar like him. Maybe it's time to sell my guitars. Then again, maybe not!

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Ms. Saundra Ertel, paralegal, has assisted Dr. Recker and Dr. Perrino in preparing for, and attending, depositions, court appearances and hearings in multiple states.

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Dr. William Biggs recently sold his Toledo dental practice to Dr. Michael O'Neill. Practice Impact would like to congratulate both doctors on a

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