# Island View

A PUBLICATION OF THE SANTA BARBARA-VENTURA COUNTY DENTAL SOCIETY • JANUARY 2023



IN-PERSON MEETINGS & MOVING DENTISTRY FORWARD!

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Day/Date	-'s Up? SBVCDS Events Event/Speaker	<b>Fee</b>
Jan 17	CPR Renewal (HYBRID) at SBVCDS Office	\$60
Feb 17	Shred Day - Camarillo, See page 28 for details	\$10/ box
Feb 21	CPR Renewal (HYBRID) at SBVCDS Office	\$60
Mar 3	Member Benefit Day - SBVCDS Office, See page 20 for details	\$60
Apr 18	CPR Renewal (HYBRID) at SBVCDS Office	

<sup>2</sup> Island View JANUARY <sup>2023</sup>



Dr. Rich Hunter SBVCDS President



Colleagues and friends,

It has been a challenging three years through the pandemic and dentistry has emerged as a leader in the medical community driven by the ADA, CDA, and our own Santa Barbara Ventura County Dental Society. As we transition away from the headlines of COVID-19, PPEs, vaccines, and social distancing - we now bring to the forefront new issues such as Delta Dental, DSOs and staff shortage. Our leaders such as Drs. Siavash, Cizek and Smith have done a tremendous job advocating for our profession throughout the pandemic, keeping our offices open, and ushering in a new era for our dentists. Thank you.

I want to assure you that Linda and the Board of Directors are working hard to maintain and add value to your membership. As we face challenges by Delta Dental and their restructuring of our fee schedules, it is up to us as individuals to stand united and show them that we have a voice through our actions against them. I intend to represent our needs as dentists to the fullest extent possible during my term as president of the society.

As an advisor to the Oxnard College Dental Hygiene Program we are working tirelessly to address the staff shortage amongst hygienists in our community. The Dental Hygiene Program continues to produce high quality dental hygienists that are prepared and eager to work in our offices. This is also true regarding the dental assistant shortages. Our dental society is committed to helping our members find quality staff for their offices. This is being addressed on the local level through collaborative efforts between the dental society and the training programs in our area, as well as on the state level through more funding for expansion of hygiene programs via legislation.

One of the things that that all organizations are struggling with as we emerge from the pandemic has been participation. We have found that people are ready to come out and, safely, be a part of the larger world again. We have several exciting and fun social events prepared throughout the 2023 year. On Friday, May 12, we will have our annual member social back at the Tower Club in Oxnard, save the date for that! And as usual we will see our annual golf tournament return in September. I encourage everyone to get involved in our dental society whether it's on the board, a committee or social events as they are a great way to get to know your fellow dentists and members of our community.

I look forward to a wonderful year in our amazing dental community. Please don't hesitate to reach out and say hello!

Sincerely,

Dr. Rich Hunter

President 2023 SBVCDS

# **BOARD OF COMPONENT RELATIONS REPORT**

January 2023



Lisa E. Beck-Uhl, DDS

Happy New Year!

I was pleased and proud to represent our component at CDA's House of Delegates meeting in Sacramento this past November. For the first time since 2019 it was in-person, and the excitement of dentists from all over California finally able to mingle with friends and colleagues in real life, was palpable.

We had a great contingent of delegates representing the Santa Barbara-Ventura County Dental Society. Our first night there was especially fun, just talking and talking and talking dentistry...live! For me, a solo practitioner, this was heady stuff. It's not often that I get a chance to do this in the best of times, and as you can probably surmise, I wasn't a fan of those Zoom meetings during the pandemic years. Organized dentistry is important, rewarding and really fun!

The House discussed and voted on several important topics:

- Protections for whistleblowers, (legislative and regulatory actions regarding this will be considered and reported on in the future.)
- "Diversity, Equity, and Inclusion" was adopted as a guiding policy.
- CDA will prioritize and accordingly address the shortage of hygienists.
- CDA will also review the sustainability of dental provider rates in the Medi-Cal program as we explore ways to promote access to care in California.
- Within the limits of law, CDA will gather data related to dental benefit plans in California and will utilize such data to continue to exploring legislative and regulatory actions focused on reimbursement rates that reflect the overall cost of practicing dentistry in our state.

The decision was also made to have two in-person meetings in 2023 for the Board of Component Representatives (BCR). Although there is a considerable cost to CDA for this, in our opinion, the remote meetings we had in 2022 were not able to be as effective as when we meet and discuss issues face-to-face.

We are still figuring out how to work this new BCR Committee after last year's restructuring of the CDA Board. To review: beginning in 2022 CDA no longer has a Board of Trustees. That used to be composed of members from each component and with over 50 members, was not in line with best-practices for organizational leadership.

Instead, we now have the BCR which meets and discusses issues at the component level. From there, the chair of the BCR committee serves on the CDA Board of Directors to communicate that information. The BCR Chair is one of 17 members on the new Board of Directors, composed of President, Secretary, Treasurer, and Directors as nominated by the Committee on Volunteer Placement.

A key reason for these changes is that previously, Trustees legally had a fiduciary responsibility to CDA and not their components. As the BCR Representative from our component, my legal and fiduciary responsibility is to serve you, the SBVCDS member, and your best interests.

I am there to represent our members and to make CDA an important organization worthy of your membership dues.

Please contact me if you have any questions or issues you would like to pass on. Or just to talk dentistry!

Sincerely,







# CDA ASKS STATE REGULATOR TO REVIEW SOUNDNESS OF DELTA DENTAL'S PROPOSED RATE REDUCTIONS FOR PREMIER AND PPO PROVIDERS

In letter to Department of Managed Health Care, CDA expresses concerns about effect of rate cuts on network's patient access, provider availability. **CDA Letter re-printed on following pages.** 

CDA is asking the California Department of Managed Health Care to review the soundness of Delta Dental of California's proposed rate reductions due to take elect Jan. 1 for participating Premier and PPO providers. Delta Dental sent notices to participating providers on Sept. 1 announcing several significant contractual amendments and reimbursement changes, including 20-40% rate reductions for most periodontists, endodontists, and oral surgeons, as CDA detailed in an email and other communications to members.

CDA has sought clarification from Delta Dental on the methodologies used to justify these changes; however, Delta has stated it will not provide any additional information, claiming the information is confidential and proprietary.

### CDA ASKS STATE REGULATOR TO REVIEW 'THE SOUNDNESS OF THE PROPOSED REDUCTIONS'

Now, CDA has asked the Department of Managed Health Care, which has regulatory oversight of Delta Dental, to step in on this "urgent pending issue" to protect provider network standards and timely access to care.

"CDA is deeply concerned that a significant provider rate reduction, such as the one being implemented by Delta, will have a deleterious elect on patient access to care because we anticipate it will result in a significant number of providers leaving the Delta Dental network," CDA states in a letter sent Nov. 14 to Mary Watanabe, DMHC director.

The letter specifically requests that DMHC review:

- The soundness of the proposed reductions given the increasing costs of providing oral health care.
- The impact of the proposed reductions on Delta Dental's existing provider network.
- Whether the financial condition of Delta Dental requires such dramatic rate reductions.

- The ability of Delta Dental to meet California's time and distance standards if the rate reductions take effect
- The effect of the rate reductions and new administrative rules on patients' coverage and benefits

The new administrative rules slated to begin Jan. 1 and referenced in the letter include processing and payment changes that members have told CDA "will detract from patient care and reduce the value of the patient's benefit plan." With the Jan. 1 effective date looming, CDA is in dialogue with DMHC about the proposed changes.

#### SUPPORT FOR CDA MEMBERS NOW

CDA will continue to advocate on behalf of members by encouraging DMHC to use its oversight authority to conduct an urgent review of the proposed changes. CDA will also continue to evaluate additional legal, legislative, and regulatory actions that may be warranted.

While discussions continue, CDA members have available resources. Affected members who have not already done so can read CDA's FAQ about Delta Dental's 2023 contractual changes to help them understand the potential effects of the contractual changes on their practice. Members can also contact CDA's expert analysts with any additional questions.

California dentists may also benefit from a customized analysis of their Delta Dental or other dental benefit plan contract through CDA's dental benefit consulting service. (/Home/Practice/Practice-Support/Dental-Benefit-Plans/Dental-Benefit-Consulting) Available at preferred pricing for CDA members, the service pairs the dentist with an expert analyst for a customized one-on-one analysis of the plan contract's performance in relation to the practice's patient base, procedure mix and fees.





November 15, 2022

Director Mary Watanabe California Department of Managed Health Care 980 9th Street, Suite 500 Sacramento, CA 95814

Re: Knox-Keene Requirements for Delta Dental of California

Dear Director Watanabe:

On behalf of the California Dental Association, we would like to bring an urgent pending issue to your attention regarding Delta Dental Plan of California's Sept. 1, 2022, notices sent to network providers of reimbursement rate and contract changes. CDA is deeply concerned that a significant provider rate reduction, such as the one being implemented by Delta, will have a deleterious effect on patient access to care because we anticipate it will result in a significant number of providers leaving the Delta Dental network. Typically, plans reduce rates when they are in financial difficulty and need to rebalance their rates with patient utilization. While we do not believe that Delta is in financial difficulty, we believe this is squarely within DMHC's oversight purview. We request your review of the soundness of these reductions given the increasing costs to provide care, the impact on Delta Dental's existing provider network, the impact on Delta Dental's ability to meet California's time and distance standards and the effect of the rate reductions and new administrative rules on the patient's coverage and benefits.

As part of this review, we encourage DMHC to review Delta's existing provider network in California and make an independent determination as to whether these reimbursement reductions and contract changes will cause delays or lack of access to medically necessary and preventive dental care. We believe that any reduction in reimbursement rates will have a negative impact on patient access and that DMHC is best positioned to ascertain how this rate cut will impact California patients.

Secondly, we know that all Knox-Keene licensed health plans, including specialized health care service plans such as Delta, are subject to financial oversight by the Department. We also request DMHC's investigation into understanding why this kind of a reduction is necessary and whether the financial condition of Delta requires such a dramatic decrease. While we understand that the DMHC does not have the ability to conduct rate review over specialized health care service plans, we believe that your existing financial oversight authority would allow the DMHC to review Delta's existing reserves, revenues and dental utilization costs to better understand why reductions such as those proposed are appropriate or required given the risk they pose to provider availability within the network.

To provide some additional background about the changes: Delta Dental of California sent out 11 different notices, depending on the type of provider and different network affiliations. In the notices, Delta announced that it will reduce various reimbursement rates, especially for specialty

providers such as periodontists, endodontists and oral surgeons, while simultaneously changing the entire nature of the fee determination process to provide for lower rates going forward, depending on the provider and the network. Delta's announcement speaks of nominal increases for some providers, but we are concerned that these increases will turn out to be illusory. Overall, the limitations and changes that Delta Dental is imposing fail to keep pace with the extraordinary inflationary costs currently being placed upon dental providers. In particular, we would like to highlight Delta's intended reductions in the specialty provider categories. These reductions range from 20% to 40% across the board for most periodontists, endodontists and oral surgeons. These rate changes are especially concerning as it has been reported – and Delta Dental acknowledged - that PPO fees have remained stagnate for nearly a decade while the cost of providing dental care has increased significantly over that time.

We have heard from our general dentist members that on many frequently used codes, PPO providers will actually see either fee decreases or increases so insignificant they might well be considered rounding errors. The specialty reductions are similar in magnitude to those proposed by Delta in 2020, but which were rescinded last year in 2021 after CDA provided a legal analysis that the reductions were based on insufficient data and would result in a shedding of network specialty providers that would potentially violate Delta Dental's network requirements under California law. Our member dentists have also reported that the 2023 processing and payment changes for Delta include more burdensome administrative requirements and restrictions that would detract from patient care and reduce the value of the patient's benefit plan. These reports from our members raise grave concern for CDA regarding the true impact of Delta Dental's changes.

As the regulator of all Knox-Keene licensed plans in California, we know the department's commitment to ensuring patient access is a top priority. We applaud your department's continued oversight and recognize that California has consistently led the rest of the nation when it comes to setting network standards, establishing timely access to care standards and helping consumers receive appropriate services without being inappropriately or excessively charged out-of-pocket costs.

Since this rate reduction is scheduled to take effect on Jan. 1, 2023, CDA requests a meeting to discuss this with you and your staff as quickly as possible. CDA staff will reach out separately regarding scheduling.

Sincerely,

Alison Sandman Chief Legal Officer

Alim P. Sant

Ricardo Lara, Commissioner, Department of Insurance Cc: Dr. Mark Ghaly, Secretary, California Health & Human Services Agency

Richard Figueroa, Deputy Secretary, Office of the Governor

# CDA FILES L GAL

# ACTION AGAINST DELTA DENTAL

After getting no response from initial inquiry, CDA pursues legal action against Delta Dental.

On behalf of members, CDA has filed a legal action against Delta Dental of California in San Francisco Superior Court. We will be sharing additional details with CDA members about the legal action in the weeks to come.

The action challenges Delta Dental's adjustments to Premier and PPO provider agreements effective Jan. 1, 2023, which include significant fee reductions for many providers, increased administrative burdens and diminished value of benefit plans. CDA alleges that the board of directors of Delta Dental, a nonprofit, tax-exempt company, violated its fiduciary duties by, among other things, failing to conduct appropriate analysis of the need for and impact of the contract changes to Delta Dental's provider network and patients.

CDA is committed to supporting our members in their practices and ensuring the patients we serve can access dental care," said CDA President John Blake, DDS. "As a dental benefit plan company, Delta Dental has a responsibility to be transparent about such significant changes that affect its provider networks and their patients. CDA believes that Delta Dental

failed to adequately consider the basis for and impact of these changes and has failed to offer sufficient justification for these actions.

CDA previously sought clarification from Delta Dental on the methodologies used to justify the significant contractual amendments and reimbursement changes, including 20-40% rate reductions for most periodontists, endodontists and oral surgeons. Delta Dental, however, stated that it would not provide any additional information, claiming that it is confidential and proprietary. Based on our review and study of adjustments to Premier and PPO provider agreements that Delta Dental has announced, as well as reports from CDA members, it appears that the changes Delta Dental is making are intended to increase its own profits without adequately considering the interests of network dentists and their patients.

Challenges with dental benefit plans are a top concern for CDA members as we are keenly aware that current dental benefit structures are not working for patients or dentists," said Dr. Blake. "This litigation is a step toward increasing transparency and accountability. Significant work must be done to develop quality, standardized and meaningful dental benefit plan requirements that meet the oral health care needs of Californians.

#### DELTA DENTAL LEGAL ACTION FAQ

## Why is CDA taking legal action against Delta Dental of California?

CDA is pursuing litigation to require Delta Dental to honor its contractual obligations inherent in the Participating Dentist Agreement between Delta and its participating providers. CDA is also challenging whether the Delta Dental board of directors has violated its legal responsibilities, referred to as fiduciary duties.

#### How does CDA's legal action impact

me? Filing the action by itself does not by itself suspend the contract changes that Delta Dental has announced. While the action we have filed challenges those actions, their validity necessarily depends upon the ruling of the court. Much will depend on how Delta Dental responds to the claims asserted in the lawsuit. The litigation does challenge the validity of the fee reductions that Delta Dental seeks to impose. Whether Delta Dental suspends those reductions or decides to go forward with them despite the legal challenge remains to be seen.

If you are not a Delta Dental provider, you may still benefit from CDA's actions since other dental benefit plans will take note of CDA's action on behalf of its members and the plan(s) may reconsider potential actions in the future which could be detrimental to CDA member dentists.

#### How long will the legal process

take? While the process is unpredictable, it is typically measured in years rather than weeks or months. In fact, when we previously filed litigation against Delta Dental, it took nearly 5 years to resolve. There are many factors that can impact the duration of the process, including Delta's response to the litigation.

Will CDA's action delay Delta
Dental of California's proposed
fee reduction or increases (when
applicable) to its providers? Filing
the action itself does not suspend
the fee reductions. As reflected
above, our litigation does challenge
the validity of those fee reductions.
Whether Delta Dental suspends
those reductions or decides to go
forward with them despite the legal
challenge remains to be seen.

The proposed changes to the Delta Dental Participating Provider Agreement and Participating Dentist Rules took effect on Jan. 1, 2023. Since the legal action was just filed, how do I know whether to accept or reject Delta's

#### proposed contractual revisions?

We do not recommend making any decisions about accepting or rejecting the revisions based on the filing of the litigation. Determining whether to accept or reject Delta's proposed changes is an individual decision each member dentist must make on their own based on what is best for their patients and practice.

What should I say to my patients about the litigation against Delta

**Dental?** You should simply inform them that how this turns out is something that the court and the parties will work through over the next several months and that there is no way to reliably predict how this, or any other litigation will turn out. It would be wise to refrain from predictions, and also wise to avoid negative or disparaging comments about Delta Dental, which could even violate the participating provider agreement. If the patient has concerns, they have the right to reach out to the Department of Managed Health Care's consumer hotline to register a complaint at (888) 466-2219.

**How can I stay informed about this issue?** Keep connected to the latest news and updates through emails from CDA



SBVCDS is collaborating with Rescue Training Institute of Southern California to provide our members with a CPR Renewal option in compliance with Dental Board requirements.

#### **Online Component**

Upon registering, you will be provided with a link to an online course which will need to be completed prior to your scheduled in-person skills test.

#### **In-person Skills Test**

We will schedule the date and time for you or your group upon registration and payment. The skills test will be scheduled in 30 minute time slots from 6:30pm - 8:30pm on the dates below.

2023 Calendar

- January 17
- February 21
- April 18
- May 16
- June 20
- September 19
- October 17
- December 5

Sponsored by:





Call to register your spot (805) 648-7282

office@sbvcds.org | www.sbvcds.org | (805) 648 7282

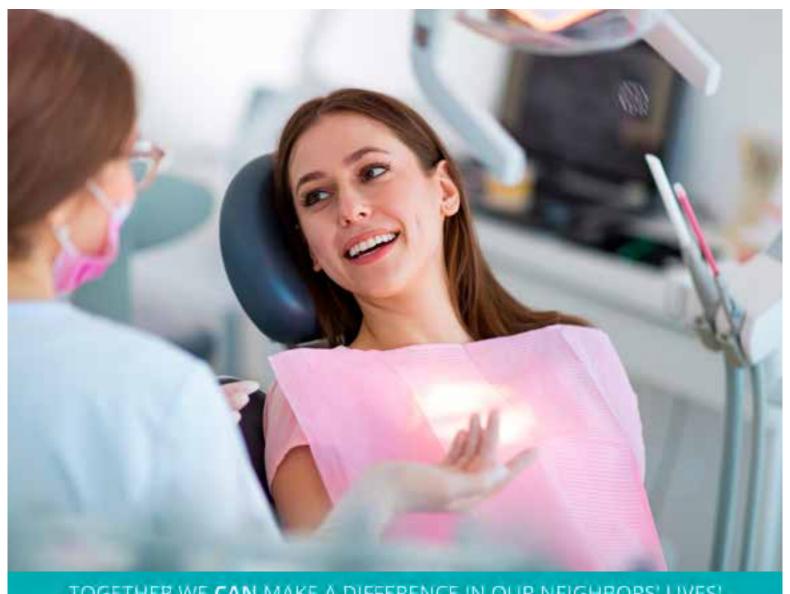
# SAVE THE DATE!

2023 MEMBER SOCIAL



THE "DENTAL PROM" IS BACK FRIDAY, MAY 12, 2023

**TOWER CLUB, OXNARD** 



### TOGETHER WE CAN MAKE A DIFFERENCE IN OUR NEIGHBORS' LIVES!

#### **MEMBERSHIP OPPORTUNITIES**

PRESIDENT'S CIRCLE				CIRCLE OF FRIENDS		
Gold - \$1,000 or more  Platinum - \$2,500 or more  Sustaining Life- \$10,000 may be payable in up to 10 annual installments of \$1,000 each.	Life - \$10,000 may be payable in up to 5 annual installments of \$2,000 each  President's Life \$25,000 may be payable in up to 5 annual installments of \$5,000 each.			Member - \$1 - \$99  Member - \$100 - \$249  Contributing - \$250 - \$499  Sustaining - \$500 - \$999		
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Address:	that reason above exactly as you want to be	rencognized to an pur	arcas roots			
Credit Card #	Billing Zip	Exp.	1	Sec. Code		
(Vita or Mantercard only) Amount Enclosed: \$	Phone number:					
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SANTA BARBARA-VENTURA COUNTIES DENTAL CARE FOUNDATION





#### ADA Asks Congress to Review the Rank of the Military and VA Chief Dental Officers

In a letter sent to Congress on Nov. 2, the ADA asked to restore the two-star rank or higher for the chief dental officers of the Army and Air Force, and upgrade the rank of the Chief Dental Officer of the Navy to two stars in the fiscal year 2023 National Defense Authorization Act (NDAA).

The ADA also wrote to the leadership of the House and Senate Veterans Affairs Committees to ask that they restore the head of the office of Veterans Affairs (VA) Dentistry to directly reporting to the Under Secretary for Health or the equivalent of the military two star rank or higher.

Impacts on dentistry: Dental readiness in the military is a critically important issue for overall medical readiness. The ADA believes that a diminution of dentistry's position with the respective surgeon generals' offices may prevent dental readiness from being maintained and improved. Failure to maintain the ranks of the chief dental officers risks many of the gains the services have recently made towards the overall dental health levels necessary to support national defense.



November 2, 2022

The Honorable Jack Reed Chairman U.S. Senate Committee on Armed Services 228 Russell Senate Office Building Washington, DC 20510

The Honorable Adam Smith Chairman U.S. House Committee on Armed Services 2216 Rayburn House Office Building Washington, DC 20515 The Honorable James Inhofe Ranking Member U.S. Senate Committee on Armed Services 228 Russell Senate Office Building Washington, DC 20510

The Honorable Mike Rogers Ranking Member U.S. House Committee on Armed Services 2216 Rayburn House Office Building Washington, DC 20515

Dear Chairmen and Ranking Members:

On behalf of the more than 162,000 members of the American Dental Association (ADA), we write to ask that you restore the two star rank or higher for the chief dental officers of the Army and Air Force, and that you upgrade the rank of the Chief Dental Officer of the Navy to the two stars in the fiscal year 2023 National Defense Authorization Act (NDAA). Good oral health is essential to military readiness and the general health of service members, and maintaining the historic rank of chief dental officers will ensure that oral health is not treated as a secondary

The statutory rank of Major General for the chief dentist of the Army was long-standing, having been established by Public Law 95-485 in 1978. Later, in 2006, Congress required that the chief dentist of the Air Force have the rank of Major General in Public Law 109-363. Congress made this change to Title 10 out of a recognition that not only should there be parity of grade for the chief dental officers of the Army and Air Force, but also because of the importance of oral health for medical readiness and timely deployment of the members of the armed forces. The Department of the Navy has also previously recognized the importance of oral health for military readiness by supporting changes to Title 10, Section 5138 that would have achieved rank parity for the Navy Dental Corps Chief (at the rank of Rear Admiral, Upper Half or O-8). However, following proposals to limit chief dental officers to one star ranks, the 2017 NDAA eliminated the statutory rank requirements for chief dental officer. No chief dental officer currently has a two star rank. Restoring historic ranks for the chief dental officer of the Army and Air Force and achieving parity for the Navy would not present a significant cost, since there is only one General or Flag Officer in the Dental Corps of the Army, Air Force, and Navy. The difference in cost would be limited to the difference in compensation for a one-star and a two-star office.

Dental readiness in the military is a critically important issue for overall medical readiness. The ADA believes that a diminution of dentistry's position with the respective surgeon generals' offices may prevent dental readiness from being maintained and improved. Failure to maintain the ranks of the chief dental officers risks many of the gains the services have recently made towards the overall dental health levels necessary to support national defense.

The ADA is also concerned that not restoring chief dental officers' ranks will have a negative impact on the recruitment and retention of military dental officers. Military dentists may view a lower rank for chief dental officers as a sign that the military is not emphasizing oral health, and that it does not recognize the contribution of military dentists to national defense.

Finally, Congress should be aware that the rank of the Chief Dentist of the United States Public Health Service (USPHS) is tied to the rank of the Chief Dentist of the Army by Title 42, Section 207. The ADA also supports a 2 star rank for the Chief Dental Office of the USPHS.

The ADA is committed to working towards better oral health for members of our military, and for all Americans. We ask that you restore the two star rank or higher for the chief dental officers of the Army and Air Force and offer parity for the chief dental officer of the Navy.

If you have any questions, please contact Jennifer Fisher at <a href="mailto:fisher@ada.org">fisher@ada.org</a> or at 202-789-5160.

Sincerely,

George R. Shepley, D.D.S. President

Raymond A. Cohlmia, D.D.S. Executive Director

GRS:RAC:jf

#### A MESSAGE FROM YOUR CDA PRESIDENT

need to start by thanking those that came before me: A few years back, Rick Nagy started his year with optimistic plans and a full agenda, then March 2020 hit. Judee Tipett Whyte must have thought, surely 2021 will be better, but still the viral squalls persisted. For Ariane Trelet, this year has been a year of connecting and re-connecting with so many. So, to Rick, Judee and Ariane, I say thank you for holding us together and thank you for your commitment and guidance through these tumultuous times. And again to Dr. Trelet, your commitment to organized dentistry, access to care and the training of young dental professionals is exemplary, I walk in your footsteps and hope to enhance the trails you continue to blaze.

So many at CDA do so much for us all as members. Those of us that use and rely on the many CDA resources know this. Peter, to you and your staff, keep up the awesome work and oh... we're just getting going; I use the clutch and throttle much more than the brake!

I'll do my best to keep this short; I don't have a lot to say, but I have a lot to do.

As dentists, we are: Surgeons, Artists, Scientists, CEO's, Mediators, and at times... un-certified family therapists. The responsibilities we have now are nowhere near what we envisioned in dental school. Our profession is changing rapidly and in ways we may not always embrace. We are all here because we care about our profession and the patients we treat. Collectively, we have the insight and wisdom to drive positive change. It is easy to complain about current times and reminisce about "the way things were" for our profession.

I am a fan of history, and we should heed its lessons, but I reserve nostalgia for cars and rock n' roll. We cannot go back; we can only stay where we are or move forward. Staying where we are reminds me of a conversation I recently had with a patient. He presented for his recall exam, we took radiographs and updated his medical history. I came in to do a clinical exam, which, other than some recession was clear. However, on reviewing his radiographs, I noticed moderate Occlusal caries on #30...his lower right 1st molar. It was that sneaky kind of caries that somehow got through the enamel and then blossomed out into dentin. Nothing to see on the tooth clinically but very clear on the radiograph. The patient remarked "it doesn't hurt" and "I can't see anything in my mouth" so "let's just leave it as is". He refused treatment and said "he'd brush better on that side". We all know how this story ends- he came back in a few months, in pain and was suddenly very receptive to treatment; in this case, a direct vital pulp cap and restoration.

Doing nothing or "staying where we are" is neither effective policy nor a way to meet the future. We are all blessed to be members of an organization that is not content to rest on its laurels. We are often change agents, called on to make difficult choices, take risks and pioneer new ground- all the while striving to leave what we touch, a little better than we found it. Along the way we make mistakes, we break things, we have some difficult, but necessary conversations. We do this to listen, to learn, to include, and to grow. In 1901 our nation's youngest president took over after William McKinley was assassinated. Roosevelt said "There can be no life without change, and to be afraid of what is different or unfamiliar is to be afraid of life".

I envision a future for CDA that is bold, diverse, inclusive and never loses sight of why we exist: to help all members grow and become productive, successful, ethical, professionals. These enriched professionals provide

valued care, leadership and are the foundation of healthy, thriving communities. Nurturing these members will take a strong CDA, with the proper resources to seed and help guide a prosperous future.

The great urban philosopher, Snoop Dogg once said, "With my mind on my money and my money on my mind". Though Snoop has imbibed a bit on the Gin & Juice, his fiscal focus and discipline



has been remarkable. We may not want to practice all of Snoop's habits, but as an organization we must continue to be fiscally responsible and plan for a future that must look different than today. How can we better influence 3<sup>rd</sup> party payers? How can we better serve all members, regardless of their practice modalities? What do our revenue streams look like next year? In 5 years? Are we relevant and useful to the early career dentist? How can The California Dental Association continue to lead the rest of our nation's dentists in innovation, services, resources and pro dentist/patient advocacy and legislation?

Our new board has been asked these questions and we are working now on solutions.

A question that is often posed to a new CDA president is "what is your issue you want to work on as president?"

My response is "what are your issues"? "What are our issues"? How can you and CDA shape a better future for our profession and patients? My role is to facilitate discussion and help grow solutions. The current issues we face are all of our priorities, not mine. We are dentists, we work as a team and we know how to prioritize and multitask. We are strong and more successful through collaboration. We have a pretty busy "to do" list this coming year but, I'm "tan, rested and ready", let's get to it!

You have heard the phrase "Behind every successful man is a strong woman" or something to that effect. That may be true but is certainly dated and borderline misogynistic. Rather, I offer, behind every successful leader is an understanding, patient, determined, quietly rebellious unicorn. This love and beautiful unicorn in my life is my wife, Cindy. I know Joy, grace, patience and... how to pack a suitcase because of you- thank you.

The late and arguably greatest dental school dean is Art Dugoni. Dean Dugoni and I had an interesting relationship. In dental school, I was a bit of a contrarian, and wound up in his office, discussing my passion for surfing and what it takes to be a dentist from U.O.P. He was firm, persuasive and gracious. I surfed less, studied more and now I stand before you. We traded notes over the years covering life events and professional successes. One note lives on my office wall. Art Dugoni ended the note with:

"May the future be filled for you and your family with an abundance of good health, success and happiness"

This is my wish for our profession and those that support it. I look forward to the challenges that await in the upcoming year. I will listen, engage and shepherd the best from our leadership. It is indeed an honor to serve this great organization.

Thank you.

Island View IANUARY 2023 15

# Panade of Lights

# Paddleboat Party!

























On December 10, members attended an exclusive SBVCDS party on the beautiful Scarlett Belle in the Channel Islands Harbor.

Dinner, dancing, and holiday cheer was shared by all and the 2023 Board was installed!

Thank you to all who joined us, you each added to the sparkle!

















# SBVCDS MEMBER BENEFIT DAY

Thank you to all who came out to our very Covid-Safe Member Benefit Day! All your required courses including CPR all done in one day.

Glad we could offer it, and glad the reviews are so positive!



**SEE YOU MARCH 3 AT SBVCDS OFFICE!** 

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Ventura: Easy-going Retiree with over 30 years of Goodwill. Busy office (4 hygiene days per week) with large potential for significant growth and high net revenues. If looking for bread-n-butter seller that refers out specialty work, has a large patient pool, and controlled expenses - this is the one.

Projecting income of \$600k for right buyer.



Moorpark: Shopping center location. Modern equipment and design. Exposure. Ideal for 1st time buyer looking for low overhead, controlled expenses and growth. Priced under \$150k for quick transaction. Seller will take active role in transitioning of patients

Santa Barbara: Old-school conservative retiree that does basic c/b and operative only with established practice accepting selected PPOs and Delta only. No endo, perio, ortho, OS or implants. Solid 3 days of hygiene. Predictable annual revenues & low overhead costs. Seller wants to go fishing -- buy it at a discount, and land a great catch!

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Island View IANUARY 2023 21

# Dental practitioners didn't face increased risk of COVID during clinical activities, says study





Dental clinicians treat a patient in the Harvard Dental Center. Photo by Steve Gilbert

**⊥** the height of the COVID-19 pandemic, many dental clinics faced temporary closure or capacity restrictions due to what was believed to be an increased risk associated with aerosol procedures. Because dental procedures require clinicians to be in close proximity to their patient's mouth and nose, practicing dentistry was considered to be a high risk for transmission of SARS-CoV-2 infection. A new paper "Evaluation of Comprehensive COVID-19 Testing Program outcomes in a US Dental Clinical Care Academic Setting" published in JAMA Network Open reveals that in fact clinical activities did not increase the risk of COVID-19 when performed in a clinical care setting with practitioners wearing standard personal protective equipment and participating in comprehensive SARS-CoV-2 surveillance testing.

The study was conducted at Harvard School of Dental Medicine (HSDM), an academic clinical care setting, between August 2020 and February 2022. As part of Harvard University's mandatory testing program, all onsite HSDM faculty, staff, and students participated in regular surveillance testing with a cadence that varied from one to three times per week depending on risk status. This provided a pool of individuals in both clinical and non-clinical roles who were tested for SARS-CoV-2 on a frequent basis.

"Our study found that the overall asymptomatic test positivity rate remained low at 0.27 percent. Being involved in clinical activities did not increase the risk of COVID-19; while individuals involved in clinical activities performed a higher number of tests per week on average, test positivity rate remained lower than non-clinical individuals, ensuring safety of both patients and practitioners at clinical settings, said Sung Choi, HSDM instructor in Oral Health Policy and Epidemiology, and an author of the study.

According to the study, the mean test positivity rate was 0.25% among individuals involved in patient-facing clinical activities compared with 0.36 percent among nonclinical individuals, revealing that faculty, students, and staff working in nonclinical roles contracted SARS-CoV-2 infections slightly more often than those in clinical-facing roles.

"We were pleased that the comprehensive SARS-CoV-2 surveillance program at Harvard kept our community safe," said Giang T. Nguyen, associate provost for campus health and wellbeing, executive director of Harvard University Health Services, and contributor to the study. "The work done at the dental school during the pandemic demonstrated that the school delivered clinical care in a safe manner, even in a setting with relatively high density of students, staff, and faculty on campus"

The findings suggest that implementing an adaptive testing cadence, based on risk status of individuals can be an effective measure for institutions to take to assist in timely detection of the SARS-CoV-2 infection and reduce the risk of infection within academic clinical care settings. It may also provide a blueprint of how clinical care can be performed safely in academic settings when faced with future virus outbreaks.

"The results of this study underscore that a dental academic setting is safe for students, clinicians and staff," said HSDM Dean William Giannobile. "Furthermore, the delivery of dental care to patients during the pandemic was safe with no documented transmission of SARS-CoV-2 from doctor to patient."





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#### Oxnard College Dental Hygiene Program

#### **Graduate Employer Satisfaction Survey**

How many dental hygienists have you employed in the last 3 years who were Oxnard College	e
graduates?	

radua	ates?			
	None			
	1-2			
	3-4			
	5+			

	Excellent	Good	Less than
	Very well prepared	Familiar with topic	Satisfactory
	Needed little to no	Needed additional	Not well versed
	guidance	training	Required additional
			training/courses
Time Management			
Communication			
Professionalism			
Punctuality			
Ethical Compliance			
Team Player			
Clinical Skills &			
Patient Care			
Dental Software &			
Computer Skills			
Infection Control			
Compliance			
Patient Evaluation &			
Treatment Planning			
Equipment Operation			
& Maintenance			

Please return to Oxnard College Dental Hygiene Department, 4000 S. Rose Ave, Oxnard 93033 or email to <a href="mailto:smcdonald@vcccd.edu">smcdonald@vcccd.edu</a>

Thank you for your response which will help Oxnard College assess our Dental Hygiene Program so that we can continue to improve and enhance our students experience and education. Please feel free to provide constructive comments.

## **DENTAL ASSISTANT INTERNS**

While SBVCDS is a proud supporter of Oxnard College's important DA program, where students graduate trained and ready to hit the work force, we know that it isn't enough!

A healthy dental community needs strong dental teams. Staff shortages are a problem everywhere, and there are pockets where it hits even harder. With gas prices, road construction, and so many other obstacles, what can a dentist do?

Your dental society is doing what it can, and we have partnered with SANTA BARBARA CITY COLLEGE and **CSUCI to increase interest in dental professions!** 

If you are interested in providing a paid internship, we want to connect you with enthusiastic young people who are eager to learn and to work. Could this become your next regular hire? Perhaps. But even if not, you

will be helping to rebuild DA populations in your community... you never know when you will need this! To put your office on the list, call the Society today! We will ask your needs and requirements, then compile a list. When we receive an interested applicant from the college, we will notify you so you can contact and work directly with them from there. Without naming specific offices, we will be promoting this program on social media and through city college channels. We hope to have a strong list of available offices by the time recruitment fairs start! Call SBVCDS now to join this program! 805-648-SBVC (7282)

**Island View** 

# CalSavers Retirement Savings Program expands to include employers with 1-4 employees

### Employers with 1-4 employees must register with CalSavers by December 2025

Nearly all employers in California, including dental practice owners, who have five to 50 employees and do not sponsor a retirement plan are already required by state law to enable CalSavers participation (https://www.calsavers.com/) for their workers. CalSavers is the state's Roth IRA voluntary retirement savings program initiated in 2019 for workers who do not have access to a retirement plan at work.

The legislation signed into law in August (https://leginfo. legislature.ca.gov/faces/billCompareClient.xhtml?bill\_ id=202120220SB1126&showamends=false) by Gov. Gavin Newsom requires newly eligible employers with one to four employees to either establish a payroll-deposit retirement



savings program or register their workers in CalSavers no later than Dec. 31, 2025, but employers can choose to start the enrollment process sooner as the program will begin accepting registrations Jan. 1, 2023.

#### **EMPLOYEE PARTICIPATION IS OPTIONAL, BUT EMPLOYERS MUST FACILITATE ENROLLMENT**

CalSavers participation is optional for employees. They can choose not to participate in the program and to reduce or increase their payroll contributions, which are otherwise set at 3% of the worker's annual salary or wages, but employers must facilitate initial enrollment and any ongoing payroll contributions for them.

The CalSavers FAQ for employers states, "All employees of a participating employer are eligible if they are at least age eighteen and have the status of an employee under California law. There are no minimum requirements based on hours worked or tenure with their employer."

Exempt employers – those who employ only the business owner or who already provide an employer sponsored plan as defined in the bill – should visit the CalSavers website (https://www.calsavers. com/?gclid=CjwKCAjwp7eUBhBeEiwAZbHwkewK4AeC6gAZJBD3Tj4bkRJd2iG4epJiMDWf4ayOnOmD9tzftERb5RoCNdAQAvD\_ BwE&gclsrc=aw.ds) to exempt their business as early as possible but no later than December 2025.

The new law only expands the program to the smallest employers; it does not make any procedural or other changes. Employers do not pay any fees for participating in the program, and they are prohibited from contributing to employee accounts.

Employers with five or more workers who did not register with CalSavers by June 30, 2022, as CDA previously reported, are out of compliance and must register immediately or face enforcement action that includes financial penalties.

# HAS YOUR DENTAL PRACTICE FILED FOR THE EMPLOYEE RETENTION CREDIT?

The ERC (Employee Retention Credit) is a one-time Federal refundable tax credit that came to life under the CARES Act of 2020. **The tax credit was designed to encourage employers to keep employees on their payroll.** In December of 2020, the ERC was modified by the Taxpayer Certainty and Disaster Tax Relief Act, expanding its scope to all organizations that received Paycheck Protection Program (PPP) loans, as well as organizations that did not receive any PPP loans.

#### IS MY PRACTICE ELIGIBLE FOR THE EMPLOYEE RETENTION CREDIT?

Most Dentist offices in California have found they qualify for the ERC refund by satisfying ONE of the following criteria:

THE PRACTICE EXPERIENCED A SIGNIFICANT DECLINE IN GROSS RECEIPTS IN 2020 OR 2021

OR

YOUR BUSINESS OPERATIONS WERE FULLY OR PARTIALLY SUSPENDED DUE TO A GOVERNMENTAL ORDER

#### HOW MUCH COULD THE CREDIT BE?

Qualified employee's wages are from full-time equivalent (30+ hours / week) W2 employees that were not funded with monies from the Paycheck Protection Program (PPP). Employers that paid employees during tax years 2020 or 2021 can potentially see refund checks amounting from tens of thousands of dollars to hundreds of thousands of dollars. The credit can be as high as \$26,000 per employee for 2020 and 2021 combined.

#### SIMPLIFIED 5-STEP ERC PROCESS

- 1. Determine eligibilty for ERC for any quarters by applying the above test's separately
- 2. Compute your ERC qualified wages
- 3. Calculate ERC and coordinate efforts with your payroll provider on options to claim benefit
- 4. Complete audit file substantiating ERC
- 5. File ammended 941x forms with the IRS and receive your refund checks

#### CALL (805) 947-0202 x131

We will be happy to speak with you and address any additional questions or concerns you may have about the ERC.



Integrity Wealth Advisors are not registered tax preparers. ERC related IRS forms are processed by tax specialists.

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#### **DENTAL SPENDING SKYROCKETED TO \$162B IN 2021**

By Melissa Busch, DrBicuspid.com associate editor

Although U.S. healthcare spending grew less than 3% to about \$4 trillion in 2021, dental services expenditures made a major turnaround, increasing by about 16% to nearly \$162 billion, according to a study published online on December 14 in Health Affairs.

In 2021, the sector saw an uptick in spending on dental services from private insurance companies, Medicaid, and patients' wallets. A decline in U.S. government expenditures for healthcare, which was up in 2020 mostly in response to COVID-19, drove the slower overall healthcare spending in 2021, the authors wrote.

"The trends in healthcare spending in 2021 are linked to the many unique impacts of the COVID-19 pandemic, including the substantially reduced federal COVID-19 supplemental and public health expenditures and an increase in the use of healthcare goods and services as people sought care at a higher rate than in 2020," Anne Martin, an economist with the U.S. Centers for Medicare and Medicaid Services, Office of the Actuary, said in a press release.

Overall, the healthcare sector accounted for about 18% of the economy in 2021, which is a decrease. In 2020, it was about 20% of the economy. Spending on dental services, along with hospital care and doctor and clinical services, helped increase growth for 2021, and it also was the most spent in the last five years.

U.S. dental services expenditures by calendar years 2015-2021						
2015	2016	2017	2018	2019	2020	2021
\$120 billion	\$126 billion	\$131 billion	\$137 billion	\$143 billion	\$139 billion	\$161 billion

For private health insurance spending, dental services expenditures increased by about 16% in 2021. That comes after an approximate 10% drop in 2020, according to the study.

In 2021, out-of-pocket spending growth increased for nearly all medical goods and services. However, the most significant accelerated growth was seen in dental services, which rose 18% in 2021 compared to an 11% decrease in 2020. For dental services, out-of-pocket spending accounted for 39% of the total category in 2021, the authors wrote.

Medicaid spending for goods and services rose about 10% in 2021 after a growth rate of approximately 6% in 2020. Faster growth in spending for hospital care, physician and clinical services, and dental services drove the increase. Dental services spending, which accounts for a 2% share of total Medicaid spending, grew about 21% in 2021, which is a major reversal from the approximate 4% percent in 2020.

"In 2021, the healthcare spending trend reflected the impact of substantially reduced federal COVID-19 supplemental and public health expenditures (compared with 2020), along with the effect of strong growth in the use of healthcare goods and services as people sought care at a higher rate than in 2020," Martin and colleagues wrote.

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# DENTISTRY IS A PROFESSION THAT ALLOWS US TO CONTINUE TO GIVE EVEN AFTER WE PLANNED TO RETIRE

Tom Wuesthoff, DDS SBVCDS Member

As we get closer to "retirement", or at least slowing down in dentistry we all have some kind of vision of what that might look like. For me, I couldn't possibly have scripted the changes that we experienced over the past 4-5 years.

First, I was very fortunate to find a nice young dentist (Dr. Scott Lundy) who loves Ventura County and was interested in making it his home. We worked together for 5 years before deciding that he would purchase the practice and I would work back for Dr. Lundy. So far, pretty much as I could have asked for.

The beginning of the "interesting" part was speaking with Dr. Andy Matsunaga who had been a friend and colleague for 25+ years. Andy told me a few years ago about this little rural clinic he was working with in Lone Pine (up Hwy 395 on the eastern Sierras) part time, and he loved it. He spurred an interest in me to at least reach out and see what it (Toiyabe Indian Dental Clinic) was all about. In spite of my repeated emails and calls, it appears they weren't interested or didn't have any openings. So I put the thought aside.

In March of 2019, on a Monday morning around 5am, I heard a distinct voice tell me to "check on Toiyabe". I got up, logged on to their website, and sure enough they had a dentist opening. Long

story short- I was in Bishop 3 days later and was offered a staff dentist position that same day for the satellite clinic in Coleville, CA. Cathy and I took the weekend to discuss the opportunity and I accepted the following Monday. A week later I was commuting back and forth from Coleville (about 2 hours north of Mammoth along Hwy 395) to Westlake Village every week to continue helping Scott and working at Toiyabe.

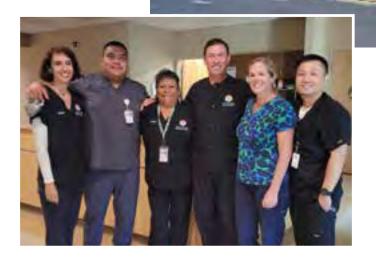
Here's where it gets real interesting. My wife Cathy (who is an RDH) began working with me at Toiyabe in Coleville in March of 2020. We worked together for one whole day- then the clinic shut down for 2.5 months. After the COVID shutdown, Cathy and I decided to try to sell our house in Newbury Park (it sold in one day, 30 day escrow, yikes) and move up to Gardnerville, Nevada to work with Toiyabe. We found a house in November of 2020, entered escrow, and three weeks later a wildfire destroyed our clinic in Coleville. All our belongings were in storage in Reno, but we had no employment in Coleville and my work in Westlake was ending at the end of 2020.

Fortunately Toiyabe needed our help in their main clinic in Bishop. We had sold our vacation condo in Mammoth and purchased a home in 2020, which made it relatively easy to transition to living and working in Bishop for Toiyabe. We still have our house in Gardnerville, and we hope to eventually be back up in northern Mono County once the clinic is rebuilt.

JANUARY 2023

Toiyabe Indian Health Project is a private, not for profit cooperative of several Native American tribes and communities that got together over 50

years ago to provide health care for the Native population along the eastern Sierras. They provide medical, dental, optometry and behavioral health from Death Valley and Lone Pine all the way up to the Nevada border and even beyond. Toiyabe employs physicians, nurses, dentists, etc who serve this patient population. Currently Toiyabe is also the primary provider for low income non-Native populations along the same area, providing care to the Medi-Cal and Denti-Cal populations.



One challenge is lack of specialists.

This challenge is not only geographic (for example, the closest oral surgeon is about 150 miles north in Nevada) but also financial- finding a specialist that participates with IHS funding and/ or Medi-Cal is very challenging. So the pressure to treat these patients is escalated. Honestly this has been very fun- we do molar endodontics, third molar surgery, etc. For any general dentist who is considering this line of work, I would highly recommend they pursue Mastership in the AGD. The exposure to all the specialties and hands on experience certainly help in this environment. It also helps to have specialist colleagues on "speed dial" to run cases by for consultation and advice!

5 years ago I could not possibly have envisioned the turn that our lives would take, but I can honestly say I have not once looked back with regret. We certainly miss friends in Ventura County- that is the tough part. I know our patients are in Dr. Lundy's great hands, which helps with the changes. But all of a sudden my thinking about

"retirement" has led to a new chapter, where I feel my services are so critically needed. I never would have thought that there were areas in California so underserved, but there certainly are.

We are fortunate to have a very healthy and fun work/life mix now- I see patients 3 days/week and spend the other days on the mountain in Mammoth or enjoying the beautiful area where we get to call home. Cathy serves as a host on the mountain year around and still sees patients at Toiyabe as well. I skied about 35 days last year-certainly can't complain about that!

At the end of the day, the real reward is through the patients. The experience is very different when you are working in an area where the patients understand how limited the access to care is. I've literally had grown adults give me a hug with tears in their eyes and say "Thank you for being here"! Those kind of interactions might help kick the retirement can down the road a little further!

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## DO VACCINATED PATIENTS HAVE TO WEAR MASKS WHILE IN THE PRACTICE?

Yes. While recent CDC guidance no longer recommends universal masking in health care settings, as noted above, the stricter requirement by the state or local agencies prevail. The California Department of Public Health September 20, 2022 guidance clearly states that masks must continue to be worn in health care facilities, long-term care facilities and other specific settings. As a best practice, refresh patient communications and signage.

# MUST WE CONTINUE TO SCREEN PATIENTS AND TAKE TEMPERATURES?

Yes. Patient screening is an essential part of COVID-19 infection prevention and is also required by Cal/OSHA aerosol transmissible disease regulation. Temperature taking is at the discretion of the dental practice. A screening form is not required but record in the patient's chart that they were screened. See the updated screening protocol.

### DO STAFF HAVE TO WEAR MASKS WHILE AT WORK?

Yes. The California Department of Public Health September 20, 2022 guidance states that masks must continue to be worn by visitors, patients and employees in healthcare settings. Masking may be optional only when all three of the following are true: in non-clinical (no patients) areas, where there have been no outbreaks in the facility and where COVID-19 Community Level is low.

An employer must provide properly fitted respirators to staff involved with aerosol-generating procedures. Cal/OSHA requires the use of respirators during such procedures in both dental and medical settings.

Staff may voluntarily choose to wear a respirator while at work and for non-aerosol generating procedures, and the employer must provide it if requested, per Cal/OSHA. Voluntary use of a respirator does not require the employer to provide a medical evaluation or fit-testing but the employer must ensure the employee is trained on how to put it on and how to perform a seal check each time the respirator is worn.

NOTE: Dentists must follow the stricter orders regarding screening, mask-wearing and other COVID-19 requirements, whether federal, state or local, and should check with their local health department to ensure compliance.

#### **CONTINUED: COVID-19 MASK, SCREENING AND PHYSICAL DISTANCING FAQ**

# ARE RESPIRATORS STILL REQUIRED TO BE USED IN THE PRACTICE?

Yes, for aerosol-generating procedures according to the Cal/OSHA emergency temporary standard. Cal/OSHA requires respirators used in the practice to be approved by NIOSH.

## HOW OFTEN MUST AN EMPLOYER PROVIDE AN EMPLOYEE WITH A NEW RESPIRATOR?

Filtering facepiece respirators, such as the N95, are disposable respirators that cannot be cleaned or disinfected. They must be replaced if they get damaged, deformed, dirty, or difficult to breathe through. A best practice is to replace filtering facepiece respirators at the beginning of each shift. Employers should follow the manufacturer's instructions. CDC recommends replacing a disposable filtering facepiece respirator after it has been taken on and off five times. Filtering facepiece respirators may not fit correctly after repeated use. For voluntary use, the need to replace a respirator varies with use and environment.

#### IS PHYSICAL DISTANCING STILL REQUIRED?

Cal/OSHA no longer requires physical distancing at the workplace. CDC recommends individuals who are sick or unvaccinated stay 6 feet away from others. For dental facilities with open floor plans, CDC recommends at least 6 feet of space between patient chairs and other strategies to prevent the spread of pathogens.

#### ARE BARRIERS STILL REQUIRED?

Barriers are no longer required by Cal/OSHA. CDC does recommend physical barriers between patient chairs and other strategies to prevent the spread of pathogens.

## WHAT SHOULD MY PRACTICE'S MASK POLICY STATE?

The dental practice's mask policy should clearly state that all patients and visitors must wear a face-covering in the dental office regardless of their vaccination status, according to CDPH guidance. Practice owners can find sample messaging in the Patient Communication and Management section.

# IF A PATIENT REFUSES TO WEAR A MASK IN MY DENTAL PRACTICE, CAN I DENY THEM SERVICE?

In limited circumstances, there could be a situation in which a patient cannot wear a mask due to a legitimate health reason. In this case, the practice may consider a special accommodation, such as scheduling the patient when other patients are not present.

The goal of the practice should be to clearly communicate the policy to patients prior to their appointment and answer any questions they may have. If the patient expresses concern prior to the appointment and refuses to wear a mask, develop messaging for your dental team to use to reschedule the patient for a later date prior to their arrival for their appointment. CDA has developed sample messaging for rescheduling patients.

## WHAT IF A PATIENT GETS UPSET ABOUT THE MASK POLICY?

If a patient refuses to wear a mask while in the dental office and becomes confrontational, it may be necessary to call security or law enforcement to help de-escalate the situation. Practice owners are responsible for keeping employees safe while they are at work. Physical and verbal violence should never be tolerated in the dental office.

NOTE: Dentists must follow the stricter orders regarding screening, mask-wearing and other COVID-19 requirements, whether federal, state or local, and should check with their local health department to ensure compliance.

Island View IANUARY 2023 3





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# SBVCDS Member

# POP

If you've been looking for a fun, casual, no-reservation opportunity to just meet colleagues and make new friends at a no-host Happy Hour after work... then you will LOVE the SBVCDS member pop-up socials! These show up in varying locations - though primarily they will be in the most central parts of our component. BYOB, but don't be surprised if there might be pizza or appetizers waiting for you!

# Follow us on Facebook to stay on top of the next Pop-Up!

(and remember, if you would like to see one in your area, email Linda and let's make it happen!)



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### SBVCDS JOB BANK

Search our listings for potential employees and employment opportunities!

Please visit

# sbvcds.org/jobsclassifieds

and follow the directions below

# Dental Professionals looking for employment:

- 1. Register as a non-member
- 2.IMPORTANT: As you're registering, make sure you set your profile to "visible" so potential employers may see your contact info.
- 3. Upload your resume
- 4. Submit

Once signed in, you will also find job posts from our member dentists that you can contact and apply through the individual office.

# Member Dentists looking to hire staff:

- 1. Sign in to your member account.
- 2.Select "I am a Job Provider"

You will see a list of applicants to choose from. Click the paperclip icon next to a name to download their resume (if they have included one).

# Member Dentists looking for employment:

- 1. Sign in to your member account
- 2. Select I am a Job Seeker
- 3. In the top right hand corner, click **Post Resume** and follow the prompts.

IMPORTANT: Make sure you select "visible" in the Privacy section.









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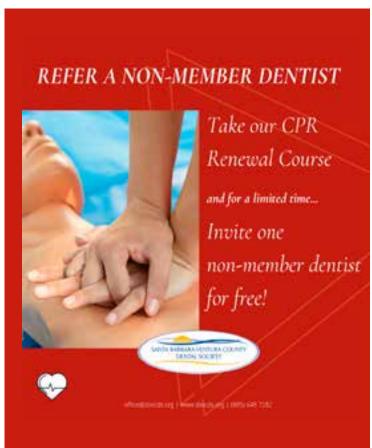
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# Do CE Courses done online still count? Yes, LIVE ones do!

- Live webinars have always and will continue to count as live CE. This also applies to courses wherein the instructor is speaking live online.
- Recorded webinars, even if the speaker is active in a chatroom attached to the recorded webinar, will no longer count as live CE as of January 1, 2022.
  - \* The courses licensees took before 2022 that were under that waiver will be allowed to be counted towards a licensee's renewal.

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# Highlights of some of your member benefits!



#### **Continuing Education**

CE Courses Infection Control/DPA Renewal CPR Renewal Radiology Certification Study Clubs

#### **Island View Newsletter**

Localized updates of your dental community Business Practice Resources Upcoming Event Notifications

#### **Other Benefits**

"Community" of Dentists Member Social Events Annual Golf Social PPE Distribution Assistance Opportunities to 'Give Back'

#### **Online Resources**

Employment Job Bank
Classifieds Listings
Compliance Documents & Templates
Calendar of Events
Local Ordinance Updates

#### **Professional Services**

Practice Management Hotline
Shredding Events
Mask Fit Testing Events
Patient Referrals
Business Referrals
Emergency Prep Planning

For even more services and information, please give us a call at (805-648-7282) or find us at **sbvcds.org** 













More Benefits as a CDA, ADA Member



**Legislative Advocacy** 

**TDIC Membership Eligibility** 

**MORE Practice Management Tools** 

**Annual Conferences** 

24 Hour Patient Referrals

**MORE CE Courses** 







### PARTNERSHIPS / ASSOCIATESHIPS / POSITIONS

Looking for a Fill-in RDH temp. Opportunity to grow into a Part-time or Full-time position available. Dental Office is expanding again and looking for an additional Registered Dental Hygienist to join the team. Send Resume to greatjobsdentalof-fice@yahoo.com

Associate Dentist Opportunity: 2-4 days per week. Single location private practice. Practice has newer equipment and use many high-tech devices. Invisalign and Lumineers certified would be fo benefit. Email jonesdds1@me.com

RDA, 4-5/days week. Salary based on experienced. 401K, Med Ins Thanks Dr Herschel Berger Dr Laura Jen Kin Husband and wife Dental Practice, Contact: Herschel Berger 805-522-6020 or syd2karli@aol.com

Front Office. Great small office in transition. Friendly staff and patients, quality dentistry. Comfortable and relaxed office environment. Office will be expanding to a nearby new location with an additional daughter dentist of the owner. Position will be full time in the near future. Please email a resume with references to jgmazurekdds@att.net

RDA or DA in Fun Pedo Office. Fun Private Pediatric Dental Office, Sunny Smiles Dentistry for Children and Young Adults, seeks a professional Registered Dental Assistant or Dental Assistant who is a team player! The person we are looking for must be dependable, capable of long-term commitment, friendly, energetic and personable. The duties include but are not limited to: chair-side assisting, taking x-rays, coronal polish, cleaning and setting up rooms. We look forward to hearing from you! ariana@sunnysmilesdental.com

Associate Dentist General/Aesthetic Dentistry Practice. Fee for service. Digital charts (Eaglesoft) Our focus is to provide high quality and respectful patient care. I am a solo practitioner looking for a like minded colleague to join my practice 2 days per week. Need to be willing to do hygiene to build a relationship with patients. Candidates who are interested, email resume to: your.sb.dentist@gmail.com

Hygienist One Day/Week General Dentistry Practice looking for a hygienist to join team our on Mondays. 8 patients per day. Candidates who are interested, email resume to: your.sb.dentist@gmail.com

Associate Dentist Associate can lead to ownership. The office is conveniently located in a highly visible, easily accessible professional building. The office occupies approximately 700 square feet and consists of 4 fully equipped operatories, a private office, a reception area, a staff lounge, a lab and 3 restrooms. The practice generates approximately 120 new patients per year. This practice has Softdent practice management

software. After the sale, the doctor will work back in the practice or mentor (if desired) to help the new doctor with a successful transition. This is only at the request of the purchasing dentist. The practice is located in a great community in which to live and practice dentistry. This practice revenues are approximately \$465K. Please send your CV to venturadds@gmail.com

Dental Assistant RDA, Experienced chairside RDA for General Dental Practice. 3 days a week . Salary based on experience. 4 day weekends every other weekend. No HMO's. Fee for service and PPO's only. Practice has been established for 40+ years. Treating 3 generations of patients. Warm and relaxing office. Experienced chairside RDA in restorative procedures, root canals, removable, x rays, with a pleasant and engaging personality. Please send your resume to rudkfree@qmail.com

Dental Office Manager Position Available, Our established, state-of-the-art dental practice is looking for a person to assist our doctors and care for our patients with consummate customer service and world class dentistry. Full time preferred. Required Skills • Experience in a dental office using dental computer software like Dentrix (or compatible), and must comprehend and master the technology that aids in planning, scheduling, and treating patients. • Experience with insurance billing and pre-authorizing, as well as payment plans and managing financial information, and must feel comfortable to collect a fee for a service patients value. • Experience with managing patient payments, day sheets and deposits, accounts receivable, and monthly statements. • Experience with scheduling and confirming patient appointments, having the ability to motivate patients to schedule and keep appointments. • Must be comfortable and skilled in phone etiquette and management to make and receive calls in a consistent, polite, and professional manner. • Must love people and have the skills to handle the challenge and satisfaction of helping scared, frightened, or even angry patients become comfortable in the dental office. • Must be highly trustworthy and ethical. Interested individuals are encouraged to to email us their resumes at doctors@drkroll.com and check out our website at www.drkroll.com.

PART TIME RDH NEEDED, Looking for a part time RDH to join our friendly team on Tuesdays & Thursdays, 8:30-5:00, Contact: LUPITA MENDO-ZA 8054851605

Ortho - Pedo/ortho practice in Santa Maria looking for ortho associate for immediate hire with possible buy-in after 1-2 year commitment. 10 – 12 days / month. For details please email cv to keithtamdds@gmail.com

#### **GOT STAFF?**

Your Dental Society maintains lists of applicants seeking dental positions. On our website (www. sbvcds.org), under the Professionals menu, click on "Jobs & Classifieds" and enter your ADA num-

ber as both your username and password, or call us at 805-648-7282 for a FAX.

#### SPACE OFFERED

Dental Office For Sale in Santa Maria (May 14th, 2021) I have a fully equipped beautiful three OP office in a Medical/Dental building across from Dignity Regional Medical Center in Santa Maria. The office is 1150 sq. ft. I am asking \$375,000. AND I am including all the equipment and records for my active practice at no additional cost. I can send photos and more information, please email me at: jworch@yahoo.com (CONTACT: DR. JOHN W. ORCHARD)

Dental or Medical Office Space for Lease: 724 E. Chapel, Santa Maria, Excellent location, fully equipped and ready for patients -low overhead practice or second office location! 805-358-2728, ameriansones@gmail.com

Ortho Office Space available in Carpinteria - 1150 sq. ft., \$2530.00/month utilities included, no NNN - Bathroom, Lab - X Streets: Carpinteria Ave. and Arbol Verde Call 805-684-4537

Orthodontist/Dentist office available for lease in Crossroads Center located in Camarillo, CA. Please contact Tracy Grair for leasing information 805-368-1269.

#### **EQUIPMENT FOR SALE / WANT TO BUY**

PureWay Eco II Amalgam Separator Free! New amalgam separator complete but not in original packaging. Santa Barbara, CA, Contact 805-895-4020 drleesb@cox.net

Pelton Crane Assistant Stool Price: \$175.00 OBO Pelton Crane Assistant Stool. Good Condition. Light Camel Ultra Leather Fabric. jbndesign22@ gmail.com

Pelton Crane Dental Exam Chair Price: \$3,250.00 OBO Pelton Crane "Spirit 3000" Exam Chair with massage. Good condition. Contact (805) 570-6507 ibndesign22@gmail.com

#### SERVICES

Locum Tenens Dentistry (Temporary Dental Services) specializing in long-term, maternity and vacation leaves. Dr. Cole 1978 USC graduate 805-953-5224 www.smilesforalifetime.com

Locum Tenens Dentist- for when you need someone who is productive & dependable in your absence. Dr. Tina Brenza Northwestern 1996 (815)621-1021 drbrenza@gmail.com. CV available upon request.

Place a Classified Ad! Give us a call (805)648-7282 or email us at admin@sbvcds.org.

Island View IANUARY 2023

# **Island View**

A PUBLICATION OF THE SANTA BARBARA-VENTURA
COUNTY DENTAL SOCIETY



1607 E. Thompson Blvd., Ventura, CA 93001

#### **OUR SUPPORTERS:**





WESTPAC WEALTH PARTNERS





# UVMINE

#### **MISSION STATEMENT**

The mission of the Santa Barbara-Ventura County Dental Society is to serve the members and the communities they serve, and to advance the art and science of dentistry.











#### **SOCIETY STAFF**

**EXECUTIVE DIRECTOR**Linda Lacunza, M.A.
execdirector@sbvcds.org

**OFFICE COORDINATOR**Felipe Diaz
office@sbvcds.org

#### **NEED TO REACH US?**

**PUBLIC NUMBER** (805) 648-7282

**DENTISTS ONLY UNLISTED NUMBER** (805) 643-3670

FAX (805) 648-5154
E-MAIL: execdirector@sbvcds.org
www.sbvcds.org

#### **IMPORTANT NUMBERS**

**AMERICAN DENTAL ASSOCIATION** (800) 621-8099

**CALIFORNIA DENTAL ASSOCIATION** (800) 736-8702

SOUTHERN CALIFORNIA WELL-BEING COMMITTEE'S CONFIDENTIAL HOTLINE (213) 383-2691