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RIDA

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DENTAL ASSOCIATION

THE BUSINESS SIDE
OF DENTISTRY
PART 1

WHAT IS THE
VALUE IN A RIDA
MEMBERSHIP?

2021
CONTINUING
EDUCATION



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*Samuel Zwetchkenbaum, DDS, MPH
RI Department of Health*

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WHAT IS THE VALUE IN A RIDA MEMBERSHIP?

Christy B. Durant, Esq., RIDA Executive Director

This summer, we held a meeting with our New Dentists Committee at the RIDA Executive office. The purpose was to learn more about the needs of our new member dentists and how RIDA can help them as they start their professional careers in dentistry. We also wanted to take the opportunity to not only get feedback on how the Association can continue to attract new member dentists but ways to get our younger members involved in leadership positions within RIDA governance.

After going around the table making introductions, we opened the meeting up for general discussions and questions. I was rather surprised to hear that one of the very first inquiries were, "Can you explain the actual benefits of a RIDA membership?" The dentist asking the question went on to explain with complete honesty, she had only joined the Association because her colleague advised her that a RIDA membership was invaluable, however, she still wasn't really sure why.

Her question gave me pause as I looked around the room at all of the new members and wondered how many other people at the table were thinking the exact same thing. This new dentist who posed the question at our meeting likely represents a whole host of current members as well as potential members who may find themselves asking a similar question when they contemplate renewal of existing membership or a new enrollment. *Why should I join RIDA? What does RIDA actually do? How does it benefit me to be a member?*

I realized that before we can focus on recruitment efforts and encouraging involvement in RIDA governance, we need to concentrate first on ensuring that not only new members, but **all** members are aware of the true value of being a RIDA member.

So much of what we do on a daily basis as an Association occurs "behind the scenes" and out of the spotlight. As a result many members may not be aware of the countless ways the RIDA is continuously working on your behalf or the numerous achievements of the RIDA over the years.

This seemed like the perfect opportunity to remind members of just a few of the endless continued benefits of your RIDA membership as well as highlight some of our significant accomplishments over the last few years.

ADVOCACY

- RIDA took legal action on behalf of membership following the unlawful raids on offices and inappropriate reprimand brought against members by a state agency for alleged CE and infection control violations.
- Ensured proper rules and regulations were promulgated by the Department of Health, setting forth inspection standards of dental offices; continuing education requirements and infection control standards.
- RIDA actively follows all legislation and lobbies before the general assembly on all bills impacting the dental profession and your rights to practice dentistry in Rhode Island.
- RIDA was the first ever state to pass the non-covered services law.
- This last session, RIDA successfully defeated a last-minute amendment to the telemedicine bill that would have changed the standard of care in dentistry.
- This session, RIDA successfully lobbied and got signed into law, a bill ensuring that there will always be an oral and maxillofacial surgeon on the Board of Dental Examiners for purposes of reviewing anesthesia cases.

ENSURING DENTISTRY HAS A VOICE AND A SEAT AT THE TABLE (PART 1)

- RIDA attends monthly RI Board of Dental Examiner meetings to stay informed of latest issues impacting dentistry in the State and to voice member concerns.

continued on next page

ENSURING DENTISTRY HAS A VOICE AND A SEAT AT THE TABLE (PART 2)

- RIDA actively participates in all RI Board of Dental Examiner subcommittee meetings pertaining to the drafting of new or revised rules and regulations, including topics such as public dental health hygienist, anesthesia, and telemedicine.
- RIDA is an Associate member and the only dental participant on the Substance Use and Mental Health Leadership Council. We actively attend meetings to collaborate with other businesses and organizations in RI on a coordinated system of high quality, comprehensive community-based mental health and substance abuse prevention and treatment services.
- RIDA is a member on the Governor's Taskforce for Overdose Prevention and Intervention and actively attends meetings. We are continuously staying informed of ways in which dentistry can help fight the overdose epidemic.
- RIDA is a member of the Oral Health Coalition and actively attends meetings.
- RIDA is in regular communication with the Office of the Health Insurance Commissioner and meets multiple times per year to discuss critical issues impacting dentistry.
- Frequent contact with ADA to stay continuously informed of up to date issues and access to valuable resources.
- Monthly calls with ADA Government Affairs to discuss both federal and state legislative issues. Coordinate resources and develop strategies in connection with any major issue that is anticipated to impact dentistry at the state or federal level.
- Ongoing daily discussions between all State Dental Executive Directors across the US on current issues impacting dentistry. Ability to get immediate feedback on urgent matters as they happen.
- Regular communication with First District leadership to stay informed of issues impacting dentistry in New England so we can be prepared and develop appropriate strategy to respond if necessary.
- Maintain regular contact with Dental Director at the RI Department of Health to stay informed of current events in dentistry as well as communicate member concerns, ideas and questions related to the practice of dentistry in Rhode Island, collaborate on promoting importance of access to oral health care in Rhode Island.

LEADERS IN THE TIME OF CRISIS (PART 1)

- Daily ADA/RIDA COVID-19 Updates, Rhode Island Information & Resources.
- Privately purchased necessary PPE supplies for RIDA member dentists at the height of the pandemic.
- RIDA advocated to federal and state agencies to obtain critical PPE supplies for the dental community and held two (2) major PPE drives to allow for distribution to ALL Rhode Island dentists.
- RIDA promptly formed a multi-specialty COVID-19 taskforce including Dental Hygiene and Dental Assistants to draft reopening recommendations and guidance for use by all dental offices in Rhode Island.
- Member access to a privately retained employment attorney to ask specific questions related to their office and COVID-19 procedures.
- RIDA hosted free webinar for members with employment attorney to address critical employer questions.

continued

LEADERS IN THE TIME OF CRISIS (PART 2)

- RIDA advocated for the full reopening of all dental offices by May 1, 2020.
- RIDA worked for and obtained special waivers on the e-prescribe implementation related to financial hardship from COVID-19.
- RIDA hosted free webinars with local financial experts to assist members with understanding PPP loans and other available financial relief.

COMMUNITY INVOLVEMENT TO PROMOTE ORAL HEALTH & GIVE BACK

- Sponsored two (2) blood drives for the RI Blood Center totaling 55 donations and 165 lives.
- Donated \$10k and boxes of food to the RI Food Bank during the height of the pandemic.
- Distributed Find-a-Dentist materials at the Back to School Oral Health Fair at the Warwick Mall.
- Donations made to other State and International Dental Associations damaged by natural disasters this summer.
- Sponsor of the RI Oral Health Coalition mini-residency program this fall.
- Sponsored National Children's Dental Health Month with TV and Radio spots reminding patients it is safe to go to the dentist.

MEMBER DISCOUNTS, EVENTS, AND PROGRAMS

- RIDA actively engages with local vendors to seek new potential endorsement opportunities that will benefit members.
- RIDA/ADA members currently receive member benefits through several vendor endorsements/co-endorsements including but not limited to:
 - Compliancy Group - HIPAA Compliance
 - Stynt - Temporary Staffing
 - ClassPass - Fitness
 - Best Card - Credit Card Processing
 - US Bank - ADA Credit Cards
 - Laurel Road - Student Loan Refinancing
 - Office Depot
 - Lands' End Business
 - Mercedes Benz Star Access
 - UPS
 - GE Appliances
 - Lenovo
- Member webinars with free CE on current topics impacting dentistry.
- Special events and social gatherings just for members.
- RIDA Quarterly Journal.

These are just a few of the many achievements of RIDA and the benefits of being a member. Don't forget, as members, you are our best advocate. Talk to your colleagues. Find out if they're members. Tell them what you've enjoyed as part of your membership and encourage them to join today! ■



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FROM YOUR PRESIDENT

John Kiang, DMD - RIDA President 2021-2022

I am honored to serve as the Rhode Island Dental Association's president for 2021-2022, and I hope that you will join me in the year ahead, as we strive to make the RIDA the strongest advocate for our profession. Our mission to advance the oral health of the public through education, advocacy, and member services have been the guiding principles that have served us well over the past year.

While we as a profession have done an exemplary job at weathering the COVID-19 pandemic, there is much work to be done. As we continue to emerge from the pandemic, we are continually challenged by more virulent and lethal COVID-19 variants. It is imperative we stay diligent and up to date with the best practices and protocols to ensure the safety of those who enter our doors. I am reminded daily that our profession is to serve our patients to the best of our abilities. We cannot become complacent, as we have worked too hard over the past year to normalize the practice of dentistry again.

Since our inception in July of 1878, we have grown from 7 members to more than 500. Our tripartite approach consisting of the ADA, RIDA, and local components (districts) enables us to address the issues that impact our member dentists and patients on a national, state, and local level. On a daily basis, the RIDA is monitoring legal and regulatory issues, advocating on behalf of dentistry and patients, facilitating continuing education and journal publications, and representing members at various boards, commissions, and committees. This approach has served us extremely well over the pandemic, as the RIDA was able to address COVID related issues, through frequent email communications/updates, webinars/virtual CE, much needed PPE distribution, vaccine advisory, and lobbying efforts to increase patient capacity to normal levels in a safe and effective way. The ADA and RIDA will continue to provide vetted scientific based resources and information to its members.

Throughout my tenure, my efforts will be focused on continuing to modernize the association through a new, more concise, and easier to navigate website, continued advocacy through our partnerships with local and state government agencies, and increase membership through the recruitment of new dentists. Ultimately, the fundamental building blocks of RIDA rests with our younger dentists. It is important we engage and recruit them with a stronger social media presence, provide them with resources that address their needs, mentor them, and instill value in membership. Organized dentistry is only as strong as its member's passion for their profession. I encourage you all to increase your

engagement with RIDA, whether it be through volunteering at various RIDA events, or becoming involved in your local component.

In closing, I would be remiss if I didn't take the opportunity to thank our immediate past-president, Dr. Karyn Ward and the RIDA executive committee, the COVID-19 Task Force, and countless volunteers for their tireless work over the past year. Their dedication and commitment allowed us to return to providing the highest quality care for patients. I commend you all for your resilience and fortitude.

Lastly, I want to thank you all for the privilege and opportunity to serve as the President of the Rhode Island Dental Association. I'm always available if you ever need anything---don't hesitate to contact me.■



"Volunteerism is the voice of the people put into action. These actions shape and mold the present into a future of which we can all be proud."

— Helen Dyer





Rhode Island

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Continuing Education 2022

Doctors, let's face it:
Dentistry is **STRESSFUL!**



Conquering the Insanity: Tips for Life's Inevitable Curveballs & The Reality of Addiction: It's Cause and Effects

with Steven Haase, DDS

February 16, 2022 9am-4pm IN-PERSON
Squantum Association, Riverside, RI
6 CEs | FREE FOR RIDA MEMBERS

Conquering the Insanity: Tips for Life's Inevitable Curveballs

Dentists must deal with incredible daily challenges daily in both their personal and professional worlds. Dr. Haase shares his inspiring story of overcoming life's obstacles and offers techniques for coping with our inevitable daily challenges. Also covered are newfound practice "jewels" and a dynamic cosmetic presentation offering incredible clinical tips and ideas to take back to the office.

Learning Objectives:

- Methods for overcoming life's obstacles and coping with inevitable daily challenges
- Identify and overcome paralyzing personal fear and its debilitating effect
- New concepts, technologies and philosophies for avoiding the 'comfort rut'
- Techniques and billing methods to ensure insurance billing works for the practice
- Create an efficient, profit driven practice while substantially decreasing the associated stress
- Internal and external marketing methods that are proven winners
- Cutting-edge cosmetic techniques ranging from single direct composites to full mouth restorations

The Reality of Addiction: Its Cause and Effects

Addiction has been viewed as a shameful, weak character flaw, though in reality it is a disease and disability. Dr. Haase shares his personal, first-hand experience and the many aspects of chemical dependency which can exist within the confines of a dental practice including patients, team and doctors. Topics include the addiction process, various drugs from prescription to manufactured street drugs and their effects, the signs and symptoms of addiction, treatment options and ways to curtail incidents associated with addiction.

Learning Objectives:

- Identify the numerous types of addictions and their respective characteristics
- Recognize the most commonly used drugs and their effects
- Distinguish and understand addictive behaviors of patients
- Spot the signs of addiction

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\$250**

**Staff:
\$60**

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ADA PRESIDENT-ELECT: *Helping DLN Patients for 24 Years*

Originally published in the Dental Lifeline Network Blog

We are thrilled that Dr. Cesar Sabates, the American Dental Association President-elect will begin his presidency in October. Dr. Sabates is a leader, an advocate, and the past president of DLN • Florida.

As a DLN volunteer with 24 years of service, he has donated over \$80,000 in dental treatment to people with special needs. Dr. Sabates recognizes the critical need to improve oral health among people with disabilities or who are elderly or medically fragile.

“Dental Lifeline Network is so pleased to see Dr. Sabates take the helm of the ADA,” said Fred Leviton, CEO of the national nonprofit. “He will, no doubt, continue to use his leadership position to advocate for better dental care for vulnerable populations who cannot access treatment.”

One of his patients couldn't be more pleased to be seen by Dr. Sabates. Gloria, a 41-year-old woman, was suffering from depression and anxiety while caring for her husband with cancer. She had not been able to visit a dentist in years and her poor oral health had become an obstacle, making it hard for her to lead a normal life. After a past failed implant, her appearance and pain in her mouth was unbearable.

Thankfully, she was connected to Dr. Sabates and the DLN Donated Dental Services (DDS) program. Dr. Sabates provided several exams and x-rays extracted four teeth, completed 13

surgical procedures, and provided dentures, all free of charge. In addition, DLN volunteer laboratories Dental Technik Azzaretto and Clinton Dental Lab fabricated the appliances.

Gloria, and many other patients seen by Dr. Sabates through the DDS program, are so appreciative to have access to crucial, comprehensive dental care, despite the inability to pay.

Dr. Sabates previously served as the 17th District trustee for the ADA Board of Trustees from 2016 to 2020 and was a delegate in the ADA House of Delegates from 2000 to 2016. He is also past president of the Florida Dental Association and South Florida District Dental Association and the first Florida member to serve as ADA president. ■



INTERESTED IN VOLUNTEERING?

WHAT'S INVOLVED:

- A DDS Program Coordinator screens patients to determine that they qualify for the program and matches the patient with a volunteer dentist. The dentist examines the patient before deciding to provide treatment through DDS.
- The volunteer dentist's staff schedules appointments and advises the Program Coordinator when a specialist or laboratory is needed. The Coordinator arranges for any specialist or lab services.
- Patients must arrive on time for appointments at the dentist's office or risk being disqualified from the program.
- When treatment is completed, the dentist reports the procedures performed and their value based on customary fees. No additional paperwork is required of the dentist or his or her staff. Some dentists continue seeing DDS patients at a discount or continue donating routine services, but that arrangement is between the volunteer and the patient and is entirely optional.



VISIT: [HTTPS://DENTALLIFELINE.ORG/OUR-VOLUNTEERS/VOLUNTEER-NOW/](https://dentallifeline.org/our-volunteers/volunteer-now/)

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SKYGEN has a long-standing partnership with Commonwealth Care Alliance (CCA) – Over 6 years in supporting CCA and helping ensure member and provider satisfaction, improve access and quality of oral health care. As a leading health plan for complex patients in Massachusetts, Commonwealth Care Alliance Inc. (CCA) is excited to announce that they are expanding to Rhode Island!

CCA will be offering Medicare Advantage Plans to Medicare eligible beneficiaries in 2022. All plans will offer robust dental benefits including preventive and comprehensive services.

CCA invites Rhode Island dentists to become a participating provider in our dental network where their experience and quality of care will help to improve the overall health of patients across Rhode Island. CCA members will have access to comprehensive dental benefits as part of their coverage for all plans.

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Credentialing can be completed entirely online by visiting SKYGEN's credentialing portal at: **<https://providercap.skygenusystems.com/CAP>**. If you need any assistance with credentialing, please contact SKYGEN's Credentialing Specialists at **1-855-812-9211** or **credentialing@skygenusa.com**.

DENTISTS LOOK AHEAD IN WAKE OF REPEAL OF MCCARRAN-FERGUSON ANTITRUST EXEMPTION

Originally published in ADA News June 21, 2021

The Competitive Health Insurance Reform Act, legislation that repeals the McCarran-Ferguson antitrust exemption for health insurance companies, became law on Jan. 13.

The law is the culmination of a multi-year effort by the ADA and dentists to persuade Congress that health care insurance, including dental plans, should no longer be protected from some of the federal antitrust laws.

So, the question is, what happens now?

The new law, aimed at improving transparency and competition in the health, dental and vision insurance marketplaces, was lobbied by the ADA in hopes that this will lead the Federal Trade Commission and the Department of Justice to investigate alleged anticompetitive practices and activities of health care insurers, said David White, D.D.S., chair of the ADA Council on Government Affairs.

“With the new law’s clear message that there is no basis for continuing the exemption, we hope that the FTC and DOJ will now investigate suspected anticompetitive conduct and pursue sanctions when it is found,” Dr. White said.

The main rationale for the McCarran-Ferguson Act, when it was adopted in 1947, was to have states manage the regulation of the business of insurance. Therefore, Dr. White said, the FTC and DOJ may have been hesitant to proceed against insurance companies, even when their conduct was not protected under the limited exemption. Another aspect that may have cooled any investigations was insurance companies claiming McCarran-Ferguson exemption in defense of antitrust allegations, he added.

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Katharine A. Burton, DMD

Burton Family Dental, North Providence
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For example, before the exemption was eliminated, Delta Dental asserted it as a defense to the pending class action lawsuit against the company in which the ADA is a plaintiff.

Consumer Reports, which has long advocated for the reform legislation, praised the passage of the bill as being good for both consumers of health care services and providers. On Dec. 22, 2020, Consumer Reports wrote “the antitrust exemption has essentially allowed health insurers to act as a monopoly, making demands in lockstep on the terms they will offer consumers and healthcare providers. The resulting squeeze puts pressure on providers to cut corners on service in order to increase the profits the health insurers can extract.”

On the May 17 episode of the ADPAC and ADA podcast Tooth Talk, the featured guest was George Slover, senior policy counsel with Consumer Reports.

The ADA has developed an FAQ (this page) as well as a one-page summary (page 12) for ADA dentists with questions about how this law will affect dentists and dental practices.

The ADA has a new online hub for ready-to-use dental insurance information that can help dentists address and resolve even their most frustrating questions at [ADA.org/dentalinsurance](https://www.ada.org/dentalinsurance). ■



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FAQ

Q. Will the new law make health insurance companies and dental plans adhere to the same antitrust marketplace rules that dentists must follow?

A. The new law places health insurance and dental plans in the same position with respect to the federal antitrust laws that other businesses are in.

Q. Will the new law make the Federal Trade Commission (FTC) or the Justice Department (DOJ) more likely to investigate insurance companies and dental plans that may be engaged in anticompetitive activities?

A. The main rationale for the McCarran-Ferguson Act when it was adopted in 1947 was to have states manage the regulation of the business of insurance. This historical reason, along with the fact that antitrust allegations against insurance companies are usually met with the McCarran-Ferguson exemption defense, appears to have made the FTC and DOJ hesitant to proceed against insurance companies even when their conduct is not protected by the limited exemption. For example, before the exemption was eliminated, Delta Dental asserted it as a defense to the pending class action lawsuit against the company and in which the ADA is a plaintiff. With the new law's clear message that there is no basis for continuing the exemption, it is hoped that the FTC and DOJ will more actively investigate suspected anticompetitive conduct and pursue sanctions when it is found.

Q. How does the new law impact self-funded dental benefit plans (so-called “ERISA Plans”)?

A. The new law's removal of the limited exemption to the federal antitrust laws that the business of health insurance has enjoyed under the McCarran-Ferguson Act applies to self-funded plans.

Q. Does the new law mean that dentists can participate with other dentists in boycotts of dental plans?

A. No. The new law does not affect this established principle of antitrust law that generally prohibits collaboration among competitors throughout the economy. Q. Does the new law mean that dentists can organize to collectively negotiate with dental plans? A. No. The new law does not affect this established principle of antitrust law that generally prohibits collaboration among competitors throughout the economy.

Q. Will the new law increase reimbursement rates?

A. There is little reason to believe that the new law will directly result in increased reimbursement rates in the near future. The positive influence the new law is intended to have in increasing competition among health insurance and dental plans in ways that will benefit both patients and providers may include the creation of plans that will offer improved coverage for patients and more attractive terms for the providers who the plans will want to participate in their networks.

Repeal of the Antitrust Exemption for Health Care Insurance

What Does This Law Do?

Passage of the Competitive Health Insurance Reform Act of 2020 is the culmination of a multi-year effort by the ADA to persuade Congress that health care insurance, including dental plans, should no longer be protected from federal antitrust laws by a limited exemption established in 1947 under the McCarran-Ferguson Act. The new law makes the conduct of health insurers fully subject to the nation's antitrust laws, just like that of all other U.S. businesses. By removing the exemption obstacles to investigation and enforcement erected by the McCarran-Ferguson Act, the ADA believes that both the Federal Trade Commission and the Department of Justice will be more likely to investigate possible anticompetitive practices and activities of health care insurers.

How Might This Benefit the Dental Profession, Dental Practices and Patients?

The law is aimed at improving transparency and competition in the health, dental, and vision insurance marketplaces. That said, it is unlikely that there will be any immediate changes for the profession, dental practices and patients/consumers. In the long-term, we expect to see changes in the dental plan marketplace that would eventually benefit all. In the past, many experts believed that the antitrust exemption suppressed the health insurance market dynamic. If dental plan companies are compelled to compete fairly and transparently, we should begin to see increased innovation and choice for consumers and providers. As the dental plan marketplace changes over time, these dental plan companies might look for ways to distinguish themselves by offering better levels of coverage, expanded provider networks and services, and other improved features. Consumer Reports, which has long advocated for the reform legislation, praised the passage of the bill as being good for both consumers of health care services and providers. On Dec. 22, 2020, Consumer Reports wrote "the antitrust exemption has essentially allowed health insurers to act as a monopoly, making demands in lockstep on the terms they will offer consumers and healthcare providers. The resulting squeeze puts pressure on providers to cut corners on service in order to increase the profits the health insurers can extract." Enactment of this legislation should begin to change that detrimental pressure. It should open up more opportunities for new insurance companies to enter the market and compete in offering better and more affordable coverage to consumers and better terms to doctors, hospitals, and providers. Existing insurance companies will have to start finding ways to offer those choices. Ultimately these choices will mean a better product for consumers, and a better arrangement for all who seek to provide health care to them. The U.S. Department of Justice agreed, writing that "where there is effective competition, coupled with transparency, in a consumer-friendly regulatory framework, insurers will be spurred to compete against each other by offering plans with lower premiums, reducing copayments, lowering or eliminating deductibles, lowering annual out-of-pocket maximum costs, managing care, improving drug coverage, offering desirable benefits, and making their provider networks more attractive to potential members."¹ The Competitive Health Insurance Reform Act helps to achieve that goal. If you have specific question about the legislation, please feel to reach out to either Chris Tampio, Director of Congressional Affairs, at tampioc@ada.org or Mike Kendall, Senior Associate General Counsel, at kendallc@ada.org.

¹ See, e.g., Competitive Impact Statement, *United States v. Humana, Inc. and Arcadian Management Services, Inc.*, No. 12-cv-464 (D.D.C., March 27, 2012), at 8, available at <https://www.justice.gov/atr/case/us-v-humana-inc-and-arcadianmanagement-services-inc>.

VOLUNTEERS NEEDED!

WHEN: January 8, 2022

WHAT: Boy Scouts Merit Badge College 2022

WHERE: Rhode Island College

The Merit Badge College (MBC) is an annual event, held at Rhode Island College on the first Saturday in January. The next MBC is January 8, 2022. We run about 50-60 different workshops through the day and will host as many as 1000 scouts. One of these workshops is Dentistry.

The workshop syllabus would be designed around the requirements the the scout must meet to earn the badge. A copy of the requirements can be obtained by contacting either the Rhode Island Dental Association or Joseph DelPonte (contact below). This is left up to the councilor. Newcomer dentists have the benefit of the experience from previous years' volunteers, Drs. Bartro and Barone.

We will run two Dentistry workshops. One each in the morning and afternoon. Each one for 3.5 hours. 8:30 to 12 and then 1:00 to 4:30. Each workshop would have 20 scouts in attendance.

There is no cost to the volunteer. We will ask that they watch a 30 minute video on child safety, and fill out a registration form. Lunch will be provided to all volunteers.

**If interested in volunteering, please contact Joseph DelPonte, Chairman,
Narragansett Council Merit Badge College Committee at jtdscouter@gmail.com.**



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Dentistry Merit Badge



RI DENTAL ASSOCIATION PRESENTS -

THE SCIENCE OF DENTAL EMBEZZLEMENT:

HOW TO OUTSMART THE THIEF IN YOUR PRACTICE
WITH DAVID G. HARRIS, FCPA, FCE, CPA, CMA, CFF

NOVEMBER 17, 2021 | RENAISSANCE HOTEL PROVIDENCE

1:00pm-4:00pm / 3 CEs

followed by cocktail hour 4:00pm-5:00pm

If you are a dentist, the likelihood that you will be the target of embezzlement during your career is greater than 80%. That's right. Greater than 80%!

As if this statistic isn't bad enough, it is even more likely that the embezzler in your practice will be a long-time, trusted member of your staff. So what is a dentist to do?

In this interactive presentation, attendees will be given some alarming facts about this serious and personally-directed crime as well as proven strategies to empower them to take back control of their office's financial well-being.

Using actual dental embezzlement case files as teaching tools, attendees will be able to use the information presented to interact with the presenter as he discusses the science, myths and misunderstandings surrounding dental embezzlement and guides participants through basic, yet effective strategies to avoid being a part of the "80%" statistic.

REGISTER ON OUR WEBSITE WWW.RIDENTAL.ORG/CE

IMPORTANT

Because specific embezzlement methodologies are openly discussed, this presentation is ONLY suitable for dentists and their spouses. As such, anyone who is not a dentist will not be able to register. Anyone who would like to register their spouse should call the RIDA Executive Office (401) 825-7700. Anyone who registers without a dental license will not be permitted. Registration is REQUIRED for this course - no walk-ins.

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BUSINESS SIDE OF DENTISTRY: *Finding Your Why*

Editor's note: This is the first article in a series exploring the business aspects of the dental profession, from starting a practice and marketing to hiring staff and finances.

Why are we starting a series on business? Who is getting into business right now, when the world around us seems to be going crazy? Why is the first topic of this series Finding your WHY?

I'm going to get to all of these questions but what I'll first do is convince you that content coming from me should be considered authentic, unbiased and non-agenda driven.

I am one of you. I am a new dentist who has a dream of owning a practice and impacting my community in the most meaningful way possible. I know how huge this decision is going to be for me. Asking for a million-dollar-plus-loan is never easy. Like you, I too want to make the decision as predictable and close to successful as possible. This is why I started the New Dentist Business Club (NDBC), a nonprofit based in Seattle, in late 2019 where other new dentists and I learn the businesses side of dentistry.

My dad started his first business when he was 46. You know what his single biggest regret was? He told me, "I wish I'd listened to my gut and had the bravery to quit my job sooner and start my dream business." My dad waited decades to finally pull the plug on his job. When I heard him say that- and he says it as often as he can to young entrepreneurs like myself, I always remind myself to not wait and just implement!

Why are we starting a series on business? Who is getting into business right now, when the world around us seems to be going crazy?

Business registration applications went up by 37.5% this year in the U.S., as compared to 2019, according to US Census Bureau. Although businesses around the world have been forced to close due to the COVID-19 pandemic, many new businesses have started. Why? There is a need!

An economic crisis forces people to become more entrepreneurial. It pushes people to reconsider their long-term goals. It causes people to evaluate what they are doing and recognize gaps.

If your long-term goal is to own a practice, don't let a pandemic get in the way! Just do it. Make your dreams come true.

Lastly, why is the first topic of this series "Finding your WHY"?

If you haven't read the book "Find Your Why" by Simon Sinek, drop everything else and go read the book. If you can't tell yourself and anybody who asks you what your WHY is, the next steps – one series article per month- will become more difficult.

Without knowing your WHY, you'll never get the results you are anticipating in life. You will experience burnout quickly. Passion will fade and you will have nothing to look at to remind yourself why you're doing what you're doing.

Don't let that be you. You need to be crystal clear in your mind about why you are getting into practice ownership. About why you're a dentist and think owning a practice is going to help you achieve your long-term goals.

A little hint: 'making money' is not a WHY. However, it does happen as a result of finding your WHY.

I found my WHY, after completing all the interviews and reflective exercises mentioned in Sinek's book. I answered questions such as: What was one event in your life that you were most disappointed by?; Whose approval do you crave the most?; If you could change the way you reacted to an event in your childhood, what would it be and why?

At the time, I was in a associateship that left me emotionally and physically drained every night. Although I was doing well financially, I was experiencing the painful signs of early burnout and knew I needed something to change. Reading the book and processing the information it brought out helped me connect the dots. It helped me remember some of my fondest memories and relate them to my dreams and goals for the future.

One of my biggest breakthroughs was realizing I wanted to spend more time meeting the need of dental care



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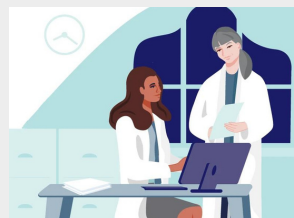
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Mentor My Future Buyer

What happened after finding my own WHY

1. It was after finding my WHY that I got smarter about money and stopped spending on wasteful CE courses, that others recommended to me. I learned how to say no to free courses when I didn't think it would be valuable with my time.

2. I began spending more time reading about business and leadership skills. I made it a habit to accept speaking opportunities so that I could continue working on my communication skills outside of the operator. All of my work at the NDBC has given me more than just knowledge on the business side of dentistry. It has helped me build up my leadership muscle, gain confidence and self-esteem, and improve my case acceptance. When patients hear me speak with confidence about implants, they believe they are in the best hands.

3. I left my old job in a large practice even though I was being paid very well. I wasn't allowed to place implants or do anything more than basic restorative dentistry there. I knew I owe it to myself to find an associateship where I can practice surgical dentistry and get mentorship in implants. When I started focusing on my WHY instead of my existing financial needs, I was able to walk away with more confidence.

Finding your WHY, will also help you decide whether you want to do a start-up or go for a practice acquisition.

Although I've been looking for acquisitions for close to a year now and will continue keeping an eye out on broker lists, because I know my WHY, I know exactly how many ops I need in my dream practice, which location I want to be at, what kind of patients I want to serve and what kind of dentistry I want to produce. I am able to automatically filter out a lot of opportunities because they simply do not fit in my long-term vision.

So, if you're serious about having your own practice one day, do your future patients, teammates, family and community a favor, and Find Your WHY. Next topic in this series is demographics. Stay tuned. ■

Dr. Sampada Deshpande is a general dentist based in Seattle. A foreign trained dentist from India, Sampada earned her DDS from the University of Washington in 2018, where she is also a current LEND trainee. Outside of clinical dentistry, she enjoys teaching at the New Dentist Business Club, biking with her husband, and reading books on Finance & Management. You can reach her directly at @dr.deshpande on Instagram or visit her website www.sampadadeshpandedds.com for more information.

This article originally appeared January 1, 2021 in the ADA New Dentist Now, newdentistblog.ada.org

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RHODE ISLAND LICENSEE DATA REPORT

by Samuel Zwetchkenbaum, DDS, MPH
Dental Director; Oral Health Program, RI Department of Health

The state's dental workforce is critical for the oral health of Rhode Islanders. Licensee data is captured every two years for dentists and dental hygienists based on renewal the previous summer and any additional new licenses. RIDOH has looked at changes in total number of dentists, proportion by age, and gender distribution. This year we add data that looks at dentist to population ration in RI communities and data on race and ethnicity.

Methods: Data is based on information provided at the time of licensure to the Rhode Island Department of Health (RIDOH), either new license or renewal, with a number of caveats. Any dentist seeking an active license and having a Rhode Island, Massachusetts, or Connecticut address is included. Those having the majority of their clinical activity out of state yet having even part time clinical activity are still considered one dentist for the state. Data on working part-time is not available, nor is data on retirement.

Race/ethnicity data is optional and is only available to those renewing. New licensees do not provide race/ethnicity data so this data is missed.

Results

The number of dentists with active licenses and practicing in Rhode Island increased between the 2018 and 2020 relicensing periods from 629 to 638. The age groups with the greatest increases were those under 40 and 50-59. By gender, 31% of dentists are female, which represents no change from 2018. This is the first year there was no change in the gender distribution. Data collection was delayed this year due to staffing changes during the pandemic and this delay resulted in more time for additional licensing, potentially creating an artifact for the data.

Rhode Island Licensed Dentists

Total number of dentists whose license status are *ACTIVE* and *primary* practice addresses in RI, CT, MA

- As of Dec. 2010 = 672 (Among these, 613 had RI practice addresses)
- As of Dec. 2021 = 664 (Among these, 615 had RI practice addresses)
- As of Dec 2014 = 665 (Among these, 610 had RI practice addresses)
- As of Dec 2016 = 675 (Among these, 626 had RI practice addresses)
- As of Dec 2018 = 665 (Among these, 629 had RI practice addresses)
- As of May 2021 = 690 (Among these, 638 had RI practice addresses)

Table 1. Dentists by Year and Gender, License address, RI, MA, or CT.

	December 2012		December 2014		December 2016		December 2018		May 2021	
	#	%	#	%	#	%	#	%	#	%
Male	496	74.7%	482	72.5%	478	70.8%	456	68.6%	475	68.8%
Female	168	25.3%	183	27.5%	197	29.2%	209	31.4%	215	31.2%
Total	664		665		675		665		690	

Table 2. Dentists by Year, Gender and Age. Source: L2K, RIDOH Licensing Database

Age	ALL DENTISTS									
	December 2012		December 2014		December 2016		December 2018		May 2021	
	#	%	#	%	#	%	#	%	#	%
<40	122	18.4%	135	20.3%	141	21.0%	154	23.2%	166	24.1%
40-49	154	23.2%	149	22.4%	153	22.7%	138	20.8%	133	19.3%
50-59	177	26.7%	171	25.7%	169	25.1%	148	22.3%	165	23.9%
≥60	211	31.8%	210	31.6%	210	31.2%	225	33.8%	226	32.7%
Total	664		665		673		665		690	

Race/Ethnicity Data

Reviewing data from dentists who indicated race/ethnicity on their license renewal, 2.5% report Black/African American and 6.4% identify Hispanic/Latino. Among dental hygienists completing the optional question, 3.5% indicated Black/African American and 5.0% indicate Hispanic/Latino. No other ethnicities are surveyed on the questionnaire. This data is viewed as preliminary due to incomplete participation.

continued from page 17

Age	MALE DENTISTS									
	December 2012		December 2014		December 2016		December 2018		May 2021	
	#	%	#	%	#	%	#	%	#	%
<40	70	14.1%	74	15.4%	71	14.9%	76	16.7%	88	18.5%
40-49	92	18.5%	90	18.7%	94	19.7%	81	17.8%	82	17.3%
50-59	138	27.8%	125	25.9%	122	25.6%	102	22.4%	111	23.4%
≥60	196	39.5%	193	40.0%	190	39.8%	197	43.2%	194	40.8%
Total	496		482		477		456		475	

Age	FEMALE DENTISTS									
	December 2012		December 2014		December 2016		December 2018		May 2021	
	#	%	#	%	#	%	#	%	#	%
<40	52	31.0%	61	33.3%	70	35.7%	78	37.3%	77	35.8%
40-49	62	36.9%	59	32.2%	59	30.1%	57	27.3%	51	23.7%
50-59	39	23.2%	46	25.1%	47	24.0%	46	22.0%	55	25.6%
≥60	15	8.9%	17	9.3%	20	10.2%	28	13.4%	32	14.9%
Total	168		183		196		209		215	

Rhode Island Cities and Towns

Dentist to population ratio was calculated based on license location and census data, with a number of caveats. If a dentist works in multiple locations, they are only counter for the community of the address of their license. That dentist is counted as one full dentist for that community, even if they only work part-time.

As example, one dentist lists Block Island as a place of practice and while care is provided one day per week, that is considered a full-time dentist for the island. Additionally, the population is considered from the year-round population of only 1000, where in-season population is likely 10 times that. Of note, this is consistent with the methodology of the Health Policy Institute of the American Dental Association which provides dentist-to-population ratio for their work. Our report also did not include hospital-based dentists in the calculation from Rhode Island Hospital and the VA as it is recognized they serve the entire state and do not necessarily address needs of their particular geographic area.

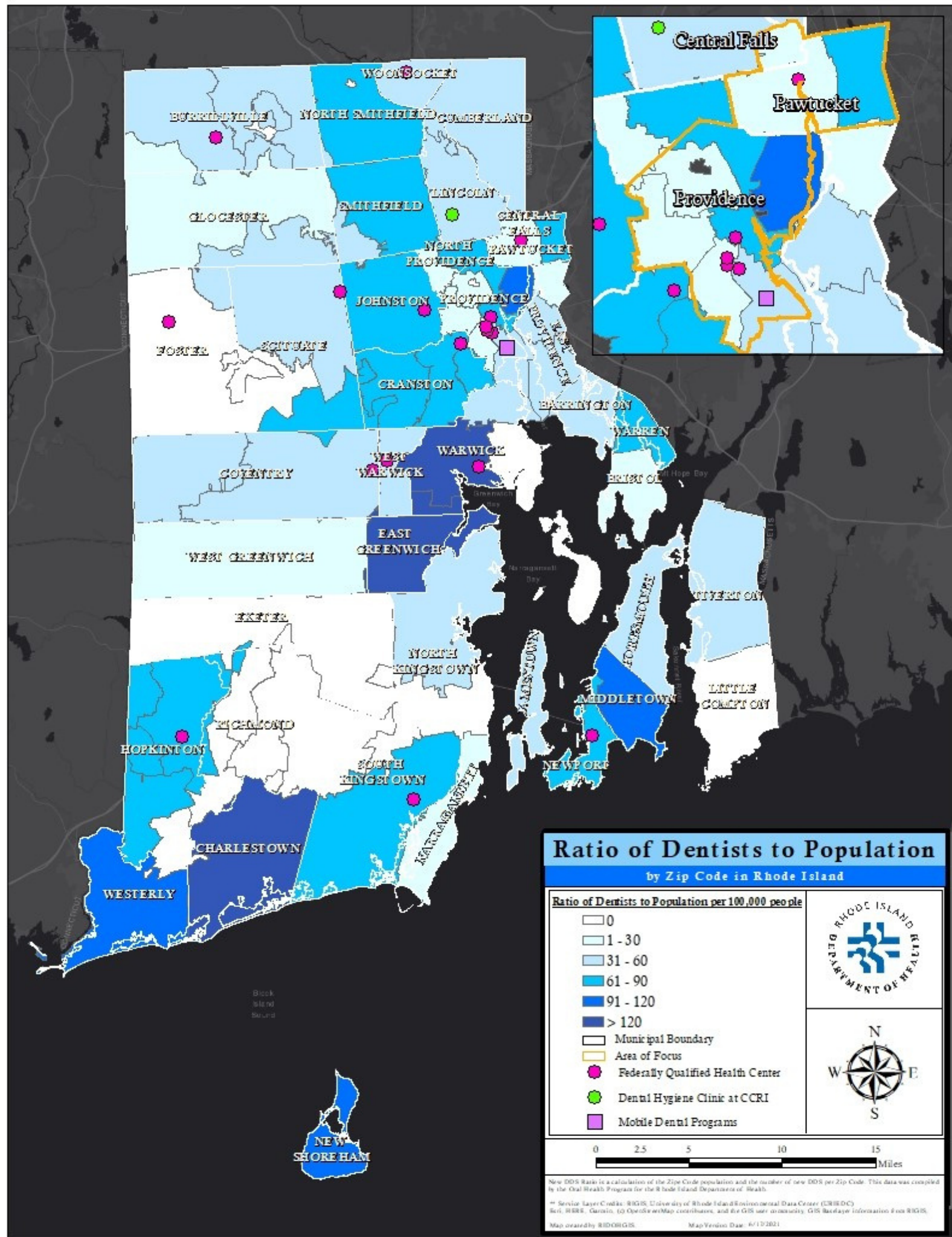
Dental Hygienists

Table 3. Age breakdown of dental hygienists licensed in Rhode Island and indicating practice in the state.

Dental Hygienists	Number	Percentage
Age 22-29	44	6.2
Age 30-39	129	18.2%
Age 40-49	169	23.8%
Age 50-59	228	32.0%
Age 60-69	129	18.2%
Age 70-79	11	1.6%
Total	710	

Table 4. Population, Licensed dentists, and Dentist to Population Ratio, RI Cities and Towns, 2020 (Data Sources: L2K Licensing Database, RIDOH, and 2010 U.S. Census)

City	Population	Dentists	DP Ratio
Barrington	16,310	7	43
Bristol	22,954	2	9
Burrillville	15,955	7	44
Central Falls	16,376	3	18
Charlestown	7,827	12	153
Coventry	35,014	14	40
Cranston	80,387	63	78
Cumberland	33,506	21	63
East Greenwich	13,146	28	213
East Providence	47,037	24	51
Exeter	6,425	0	0
Foster	4,606	0	0
Glocester	9,746	3	31
Hopkinton	8,188	5	61
Jamestown	5,405	2	37
Johnston	28,769	20	70
Lincoln	22,105	13	59
Little Compton	3,492	0	0
Middletown	16,150	18	111
New Shoreham	1,051	1	95
Newport	24,672	16	65
North Kingstown	26,486	15	57
North Providence	32,078	12	37
North Smithfield	11,967	9	75
Pawtucket	71,148	31	44
Portsmouth	17,389	10	58
Providence	178,042	80	45
Richmond	7,708	0	0
Scituate (Greenville)	10,329	11	106
Smithfield	21,430	9	42
South Kingstown	30,639	24	78
Tiverton	15,780	10	63
Warren	10,611	8	75
Warwick	82,672	65	79
Westerly	22,787	22	97
West Greenwich	6,135	1	16
West Warwick	29,191	14	48
Woonsocket	41,186	20	49





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Zoe Corner, DMD

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Kevin Eagan, DDS

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Rhode Island Medical Society

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We invite you to look at our website: www.rimedicalsociety.org/physician-health-program.html for more information or feel free to shoot us an e mail:

Jason Conforti, the Physician Health Committee's representing dentist, jdconfor@gmail.com

Or Kathleen Boyd, RIPHP Director

Kboyd@rimed.org

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