VOLUME 2 | NUMBER 3 | SUMMER 2018

RIDA

JOURNAL OF THE RHODE ISLAND DENTAL ASSOCIATION

Get to Know Our 2017-2018 OFFICERS

RHODE ISLAND FREE CLINIC ADDS Dental Care for Uninsured Adults

CONTINUING EDUCATION

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> Interested in contributing to the Journal? Contact us TODAY! The next deadline is October 1, 2018



Rhode Island Dental Association 875 Centerville Rd., Bldg. 4, Ste. 12 Warwick, RI 02886

The Journal of the Rhode Island Dental Association is a peer reviewed publication. Opinions expressed by the authors does not necessarily represent the policies of the Rhode Island Dental Association or the Journal of the Rhode Island Dental Association. Beginning in 2018, the Journal of the Rhode Island Dental Association will be published four times a year in the winter, spring, summer, and fall. For information regarding advertising, email: info@ridental.org or visit www.ridental.org/news-classifieds/RIDA-Journal

FROM THE PRESIDENT

By Jennifer Torbett, DMD;

Rhode Island Dental Association President 2018-2019

Summer is finally here! While most people are just starting to slow down and enjoy the season, I am just starting my new role as President of the Rhode Island Dental Association (RIDA). I couldn't be more excited, and yes, I am also enjoying the benefits of summer in RI.

I became involved in organized dentistry while in dental school. I was the American Student Dental Association class liaison and served as guest trustee to the Massachusetts Dental Society on their membership board and Women's Dental Task Force. I continued my participation after graduation as a member. I relocated from Boston two years after graduation and was immediately asked to attend the South County Dental Group meeting. I served as Trustee to the component for several years and slowly began my assent to my current position. I have had the privilege to work with, be inspired, and mentored by some absolutely amazing dentists. I can only hope that I represent their trust in me.

I became involved in the RIDA because I wanted to have a voice in how my career and profession will evolve. I wanted to be an active member of the decision-making process. The scope of dentistry is certainly changing, and we need to stay current in order to stay relevant.

My aspirations for the coming year as president of the RIDA are to do just that. At the last House of Delegates meeting, it was voted to look into the elimination of the components. A task force has been formed and has met to explore options to consolidate or eliminate the number of components currently in the state. By doing so, we will have a better opportunity to obtain a quorum at our House meetings, eliminate the legal and financial responsibility of our volunteer component presidents, and reduce the stress of filling leadership positions. I also want to look into our committees and councils to determine their relevance and streamline some positions. The RIDA, with the exception of two- sometimes three- employees, is run by volunteers. We all live very busy lives, but the vitality of our association is determined by these volunteers. It is my goal to eliminate the stress and burden of these positions by providing a better understanding of the time commitment of each committee, council, trustee, or executive board member. Having a realistic understanding of the time needed will foster better volunteerism and engage more members.

We have seen first hand the change in communications within the RIDA over the last few years. This publication is the perfect example of this. The journal and the updated website are great sources of knowledge for our members. It is also our goal to have all component meetings included in the RIDA master calendar.

This year, with the help of our stellar executive board members, my goal as your president is to bring the association forward, establish our significance, continue Dr. Gettinger's commitment to engagement, and make the RIDA more user friendly for all our members regardless of age, experience, or scope of practice. I am truly humbled to serve as your president and look forward to this next year representing an esteemed group of professionals.



STEM-based



Dentistry Merit Badge



VOLUNTEERS NEEDED!

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 5, 2019. 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. 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.



2018-2019 OFFICERS

Congratulations to our 2018 slate of officers. They were installed by Dr. Judith Fisch, ADA First District Trustee, during the May House of Delegates meeting.



President

Jennifer Torbett, DMD

Dr. Jennifer Torbett earned her Bachelor of Science degree from Salve Regina University summa cum laude and her Doctorate of Medical Dentistry from Tufts University School of Dental Medicine in Boston, Massachusetts. Upon graduation, she worked in Boston as a clinic director and served as faculty member at Boston University School of Dental Medicine. She now owns her own practice in Westerly, Rhode Island.



President-elect Martin Elson, DDS

Dr. Elson received his Bachelor of Science degree from Fairleigh Dickinson University. He continued there to begin his graduate schooling and went on to receive his Doctor of Dental Surgery degree from Northwestern University School of Dentistry. He also completed a General Practice Residency and Oral and Maxillofacial Surgery and Facial Trauma Fellowship training at the University of Maryland.



Vice President Karyn Ward, DDS

Dr. Karyn Ward earned her dental hygiene degree from the University of Minnesota, her Bachelor of Science degree from Northeastern University, and her Doctor of Dental Surgery degree from the University of Maryland. She has taught at the Bristol Community College and is currently a part-time clinical faculty member at the Community College of Rhode Island Dental Hygiene Clinic.



Secretary John Kiang, DMD

Dr. Kiang earned his B.A. from Wesleyan University in Middletown, CT., a M.A. from Boston University School of Medicine, and obtained his D.M.D. from Boston University School of Dental Medicine. Dr. Kiang completed an Advanced Education in Pediatric Dentistry residency in Providence, RI through NYU Lutheran Medical Center where he was selected to be the lead resident of the craniofacial program.

CLOSING A DENTAL PRACTICE WHEN IT'S TIME TO CLOSE YOUR DOORS

The reasons dentists close their practices vary, including retirement, financial challenges or serious illness or death. If you are looking to close your practice, the **ADA's A Guide to Closing a Dental Practice**, will help you through the process. It contains useful information to help you with the many details involved in ending a practice. The guide is free for members and can be found in the ADA Catalog or by searching for "Guide to Closing a Dental Practice".

FROM THE EXECUTIVE DIRECTOR RHODE ISLAND DENTAL POLITICAL ACTION COMMITTEE

By Chris Klimecko, RIDA Executive Director

Political Action Committees, or PAC's, have become commonplace amongst the US political landscape. And although they might seem like somewhat of a modern construct, they've actually been with us since the 1940's. There are essentially two types of PAC: federal and state. Federal level PAC's function in accordance with the Federal Election Campaign Act. At the state level, they operate in accordance with state election laws. The Rhode Island Dental Political Action Committee (RIDPAC) is a state level PAC.

RIDPAC was formed in 2003. In creating it, one of the goals was to help encourage dentists and others to become aware of state government, Rhode Island specific political issues relevant to the profession, and the records of state representatives and candidates. Through those efforts, members of the PAC can then make informed decisions on which candidate(s) the PAC will support in the next election.

It's no secret that our PAC has not been very active over the last few years. Since 2013, annual donations have been minimal, and state election law prevents us from requesting donations on theannual dues invoice. Consequently, the PAC account currently has a critically low balance—which is why we are in the process of trying to reenergize the PAC.

Now some, if not all of you, probably received a letter by now

regarding a proposed RIDPAC fundraising event. If you haven't received it, you will. The event will be a post-primary town hall style gathering (exact date to be determined) where invited gubernatorial candidates will have the opportunity to answer questions (they'll receive them prior to the event) related to the dental profession in Rhode Island. The cost of the event will be \$250 per person or \$400 for couples. Hors d'oeuvres will be served and a cash bar will be available. Admission will include one beer or glass of wine.

Please consider attending. RIDPAC is a necessary and useful tool—one that we don't want to lose. The future of the dental profession in Rhode Island is something that all members should have a say in, and the PAC is an excellent way to ensure that you do.

A HAPPY NOTE ...

You may have noticed that e-mail coming from our office coordinator; Madeline Frank, now has a different last name affixed to it. That's because on July 14th, she married Robert (Bobby) Benner.

Congratulations to the happy couple. We wish them a long and happy life together!

The Association of Retiring Dentists announces its <u>10th Annual Meeting</u> on

October 26, 2018 in Manchester, NH

The featured speaker is ARD Board member, Hugh Habas, D.D.S., talking about, "Retirement Money: Earning it. Managing It. Using It". The afternoon session will be devoted to "Teledentistry", with speakers, Dr. Marc Ackerman, President, American TeleDentistry Association; Dr. Maria Kunstadter, The Teledentists; and Dr. Jeff Sulitzer, Smile Direct Club. Registration is open here: <u>http://retiringdentists.com/events/10th-annual-meeting/</u> and speaker information here: <u>http://retiringdentists.com/meet-the-speakers-for-our-tenth-annual-meeting/</u>

Association of Retiring Dentists



RHODE ISLAND FREE CLINIC **ADDS DENTAL CARE FOR UNINSURED ADULTS**

"Over 50,000 Rhode Islanders do not have healthcare because they do not have access to it, cannot afford to buy insurance, or have no means to acquire it."

The Rhode Island Free Clinic (Clinic) located in South Providence, has been serving the state for nearly 20 years providing health care to uninsured, working poor and low-income Rhode Island adults. Over 50,000 Rhode Islanders do not have healthcare because they do not have access to it, cannot afford to buy insurance, or have no means to acquire it. Many Clinic patients have not seen a doctor in years due to the high costs of visits and prescriptions, or other barriers. The Clinic is nationally recognized as a dynamic volunteer model, mobilizing a statewide corps of nearly 600 health care professionals, and community partners. Clinic volunteers donate their time every day to fill a gap for uninsured adults, exemplifying the ideal that all people deserve quality health care regardless of their life situation. Soon, dental professionals will be added to the Clinic's dedicated team.

The Clinic provides primary care, nearly 30 medical specialties, wellness programs and preventive services on-site, as well as medicine and Minute Clinic care from CVS – all free to patients. However, dental care remains a critical need for the 2,000 Clinic patients as identified by patient satisfaction surveys and patient inquiries. In a 2016 dental survey of 200 Clinic patients, results confirmed the critical need for services. Over 88% of patients surveyed did not currently have a dentist and 70% had dental issues. Further, 98% of patients said they would use dental services at the Clinic if they were

available. Since poor oral health exacerbates diabetes, the Clinic recognized that providing oral care would benefit the 1 in 5 Clinic patients diagnosed with diabetes.

Thanks to the support of Delta Dental Rhode Island (DDRI), collaboration with community dentists and existing dental programs, and planning with dental leaders, the Clinic's Board developed a strategic plan to integrate dental care into the Clinic's comprehensive health care model. The Clinic is grateful to Champlin Foundation for their generous support for facilities and equipment to make this a reality for patients. Construction is underway for a 2chair dental suite, which will be ready to serve Clinic patients late 2018. Working closely with dental supplier, Benco Dental, the Clinic has secured new state of the art equipment and in-kind services. Thanks to the partnerships of health champions including DDRI, CVS Health, the Rhode Island Foundation, Blue Cross Blue Shield of RI, Amica, Ocean State Job Lot, Lifespan, Coastal Medical, and so many other strong partners and donors, the Clinic can begin dental care. For the initial operations, the Clinic will provide basic dental services including routine cleanings, oral examinations, simple extractions, and health education for Clinic patients. The Clinic is excited to build other necessary dental services through the years of sustained partnerships and volunteer support.

Continued on page 5

Volunteers are the heart and soul of the Rhode Island Free Clinic. In fact, 50% of the Clinic's lean, core team are AmeriCorps VISTAs, exceptional college graduates that commit to a year of service at the Clinic. The Clinic's Dental Care VISTA will work to build the dental volunteer team. The Clinic is currently recruiting for a bilingual dental assistant and part-time dental hygienist to manage the Program working alongside with our corps of volunteer dentists, dental hygienists and other dental partners. Dentists or hygienists who wish to volunteer at the Clinic will receive malpractice insurance coverage through the support of the Federal Torts Claims Act Program (Section 224(o) of the Public Health Service Act). This program provides free malpractice insurance to licensed providers working at free clinics. In addition, retired dentists volunteering at the Clinic will be able to receive a volunteer Rhode Island license at no cost.

The medical-dental integration at the Clinic would not have been possible without the planning of the Clinic's Medical Advisory Clinic led by Jerry Fingerut, MD and Caroline Troise, MD, also the Clinic's Medical Director. Volunteer dentists, Maria Saccoccio, DMD, and John Wade, DMD are serving as Dental Directors and have already donated over 200 hours towards the Dental Program. The Clinic is also grateful to Shirley Spater, DMD, Marty Nager, DMD, Robert Bartro, DDS, Sam Zwetchkenbaum, DDS, and other dental leaders for their expertise and commitment to volunteer.

Rhode Island Free Clinic volunteers are an inspiring example of service and action. The Clinic thanks them for their time and energy to provide high quality and reliable health care to thousands of our state's most vulnerable adults. As an interprofessional hub, volunteers, healthcare professionals and students work together with a common goal of quality care for all. Providing dental care could not happen without their volunteer service, dedication and commitment. The Clinic urges all Rhode Islanders to consider supporting the Clinic with their time, talent, and treasure, and also to take the time to visit the Clinic, to see the outstanding example of personnel commitment and community service. There are many opportunities for health care staff, language interpreters, students, retirees, and others to get involved, help others, and work with the Clinic's inspiring team of dedicated volunteers. If you are interested in becoming a dental volunteer at the clinic, check out the Clinic's website at www.rifreeclinic.org and contact Nicole Salfi, the Clinic's Dental VISTA, at nsalfi@rifreeclinic.org or at 401-274-6347 x209.



Dental Volunteers, Front Row, left to right: Maria Saccoccio, DMD; Joseph Samartano, DDS; Thomas Correia, DDS. Back Row, left to right: Daniel Kane, DMD; John Wade, DMD; Marty Nager, DMD; Jeffrey Dodge, DMD; Robert Bartro, DDS.



The construction of the Clinic's Dental Suite still underway.



Concerned about the well-being of a doctor?

The Rhode Island Medical Society's Physician Health Program has helped hundreds of physicians, dentists, podiatrists and physician assistants address personal health issues that can sometimes compromise professional performance. As a peer review body, the Physician Health Program and its Committee have the strong protection of both Rhode Island and federal law for the confidentiality of its work.

Anyone can make a referral to the Rhode Island Medical Society's Physician Health Program (RIPHP), including physicians or other healthcare practitioners who refer themselves. Most referrals come from concerned colleagues, hospitals and other healthcare systems, and the Rhode Island Board of Medical Licensure and Discipline.

If you are concerned about yourself or a colleague, **call the RIPHP office at** (401) 443-2383 and ask to speak with the Program Director.

COMMON WARNING SIGNS

- Rapidly turns from compassionate and caring to abrupt/caustic
- Withdraws from friends and activities
- Becomes mistrusting, anxious, depressed, irritable
- Loss of appetite or reduced level of exercise
- Looks tired; admits to insomnia
- Personal hygiene deteriorates
- Physical problems are self-treated
- Misses appointments
- Makes rounds at unusual hours
- Can't be reached when on call
- Sloppy charting
- Smell of alcohol on breath during the day
- Family communication deteriorates
- Frequent arguments, spouse blamed
- Occurrence of spouse, child abuse
- Children may exhibit poor school performance
- Jealousy, infidelity leading to separation, divorce

2018 RHODE ISLAND SKILLED NURSING FACILITIES ORAL HEALTH REPORT

This month's issue features a report on oral health services in Rhode Island nursing homes*. This work was a collaboration between Healthcentric Advisors, a nationally-recognized health research organization, and the Oral Health Subcommittee of the Long Term Care Coordinating Council. The Subcommittee worked closely to develop a set of survey questions that were meaningful, yet not overly burdensome, with an eye toward keeping a high response rate. I can share that despite the many eyes that reviewed the survey, as is often the case when results came in we wished we had asked the questions in a different way or included additional questions. The report you see presents a small amount of the information gathered, and was written primarily for a general audience without a significant dental background. Nursing home administrators completed the survey and will be receiving the report also.

One data point of interest is the frequency of dental care provider visits to the nursing home. If the mean number of long stay beds is 78.2, and we estimate one-third of residents are edentulous, we might estimate that 50 individuals at an average facility would benefit from preventive dental visits two times per year, for a total of 100 preventive visits. To accomplish this, a hygienist would likely need to visit monthly. However, our data suggest that only 1/3 of nursing homes report a hygienist visits monthly and just one in six homes report a dentist visiting monthly, which can delay processes such as examinations, denture fabrication, and addressing urgent needs. With public health dental hygienists now beginning to receive licensure, we hope that assessment and preventive services can be provided more routinely.

A data point that did not make it into this report but was presented at May's Oral Health Summit was about location of dental care services. Very few reported an actual dental chair was used, and a significant number reported that the beauty salon was the designated spot for dental services. We were fortunate to have Dr. Joe Box in the audience at the Summit, who shared that a beauty salon is not clean, the chair lacks proper head support, and the setting is uncomfortable for the dental team. I agree—I've worked in similar settings and at the end of the day you do not want to come back. Over 25 years ago, I provided dental care at the Jewish Home on Hillside Avenue in Providence, which had a proper operatory and felt like a dental office. Until all nursing homes have appropriate equipment, we cannot expect providers to eagerly or enthusiastically provide care for older adults in this setting on a regular basis.

The Oral Health Subcommittee is now completing a Senior Oral Health Plan which will include recommendations for change. The plan will include measurable objectives, for example, increasing the proportion of nursing homes with monthly dental visits by x percent, increasing the number with a proper dental chair by y percent, etc. While this current report may have its limitations, its strength is that it serves as a starting point. We are grateful to the hard work put in by many and look forward to future improvement in dental care for older adults.

-Samuel Zwetchkenbaum, DDS, MPH Dental Director - Oral Health Program Rhode Island Department of Health



RIMOM 2018 VOLUNTEER REGISTRATION IS NOW OPEN! Visit WWW.RIMOM.ORG to register





2018 Premier Sponsors





CONTINUING EDUCATION 2018-2019











SEPTEMBER 19, 2018 9:00AM - 4:00PM | 6 CEUS TIMOTHY BIZGA, DDS "BOTTOM LINE BOOSTERS"

In today's general dental practice, 40% of revenues come from crown and bridge procedures. Eighty percent of those procedures are single unit crowns. In addition, a staggering 45% of all billed direct restorative procedures are Class II's! This course begins with describing the principles of preparation design and stresses the importance of thoughtful tooth preparation. A review of current concepts in tissues management and Impressioning will be discussed. The focus then shifts to Class II restorative solutions and procedures.

NOVEMBER 7, 2018 9:00AM - 4:00PM | 6 CEUS DANIEL POMPA, DDS "MEDICAL EMERGENCIES"

A crisis situation can -and likely willoccur at some time in your practice. Many potential medical emergencies can be prevented. Gain a comprehensive command of the essential knowledge and skills needed to handle a life threatening medical crisis. Dr. Pompa will discuss the prevention, preparation, recognition and management of medical emergencies. Additionally, the participant will learn simple, non-invasive critical tests that can reduce overall risks.

FEBRUARY 13, 2019 9:00AM - 4:00PM | 6 CEUS MICHAEL GLICK, DMD AM: "TREATMENT OF THE MEDICALLY COMPLEX PATIENT" PM: "EVIDENCE-BASED DENTISTRY"

course description will be available at a later date

APRIL 10, 2019 9:00AM - 12:00PM | 3 CEUS JOYCE MOORE, RDH "OSHA & INFECTION CONTROL 2019"

An overview of current infection control practices - a full course description will be available at a later date.

REQUIRED YEARLY FOR ALL DENTAL PROFESSIONALS

MAY 22, 2019 9:00AM - 12:00PM | 3 CEUS RAYMOND MILLER, DDS "FORENSIC ODONTOLOGY"

Forensic Odontology has been used historically in victim identification and bitemark evidence. Emerging dental technology is changing methods in victim identification and solving cases that reached a dead-end in the past. Bitemark analysis has come under increased scrutiny in the courtroom and have challenged the admissibility and reliability of this evidence. The controversies will be presented and participants will be able to make an educated opinion regarding the value of this evidence. The history and science of forensic dentistry will be explored as well as to what the future may hold. Dentistry will always have a role but like many aspects of our profession it is an ever changing discipline.

ALL COURSES WILL TAKE PLACE AT THE QUIDNESSETT COUNTRY CLUB -950 NORTH QUIDNESSETT RD., NORTH KINGSTOWN, RI

LUNCH IS INCLUDED WITH FULL DAY COURSES

MORE INFORMATION AND REGISTRATION CAN BE FOUND AT: WWW.RIDENTAL.ORG/EDUCATE/CE

A MESSAGE FROM ADA MEMBERSHIP AND CLIENT SERVICES

Autumn Wolfer, Manager, Dental Society Outreach

Summer greetings! Summer has been going great at the American Dental Association with some exciting updates to provide.

2018 National Signing Day

Each year the ADA partners with the nation's dental schools for National Signing Day. National Signing Day gives senior dental students the opportunity to take the next step in their careers by converting from student membership to membership at the state, local and national levels.

These National Signing Day events are held locally throughout the country in collaboration with the state and local dental societies, the U.S. dental schools and the American Student Dental Association (ASDA).

This year we're pleased to welcome over 4,000 new dentists to organized dentistry through the ADA's National Signing Day program, many that may be coming to a practice near you!

If you know a student that recently graduated from dental school that you'd like to recommend get involved in organized dentistry, it's not too late to join us! Simply direct them to the online form at ADA.org/signingday!

REMINDER! ADA Credentialing Service: Have You Registered?

As you may or may not know, the ADA has teamed up with the non-profit CAQH to help streamline the credentialing process for dentists. The ADA Credentialing Service, powered by CAQH ProView, enables dentists to enter all of their professional information in an easy-to-use, digital platform that will help reduce redundant paperwork and house your credentials in a single location. And dentists will only have to enter their information in once! This platform is protected and free to dentists, allowing them to share their information with the participating organizations they choose.

Help the organizations that are looking for you, find you! Completing the registration can eliminate the need for one-off requests for information since it is all available in one convenient location. You can complete the registration at ada.org/credentialing.

I hope you are all having an excellent and enjoyable summer. If you have any questions, suggestions or feedback about the ADA, please do not hesitate to reach out to me directly at wolfera@ada.org.

Enjoy the rest of your summer!

MEMBER NEWS DR. NICHOLAS D. BARONE INSTALLED AS PRESIDENT-ELECT OF THE AMERICAN BOARD OF ORTHODONTICS

On May 8, 2018, the American Board of Orthodontics (ABO) installed Dr. Nicholas D. Barone of Lincoln, RI, as 2018-2019 president-elect. The event was held at the ABO President's Dinner in Washington DC.

Dr. Barone received his doctorate in dentistry from the Georgetown University School of Dentistry in 1975 and earned his certificate in orthodontics from the Medical College of Virginia at the Virginia Commonwealth University in 1977. Dr. Barone practices with his son, Nicholas P. Barone, DMD, in North Providence and Smithfield, R.I, and has been active in numerous dental and orthodontic organizations. He is a past president of the AAO Foundation, the Northeastern Society of Orthodontists, the Rhode Island Dental Association, the Rhode Island Association of Orthodontists, and the Providence District Dental Society. Dr. Barone served on the Rhode Island Senate Oral Health Commission from 2000 to 2004. He is also a member of the Angle East, a component of the Edward H. Angle Society of Orthodontists, and the Pierre Fauchard Academy. He is a fellow of the International College of Dentists and has been board certified since 1990.

The ABO is only orthodontic specialty board recognized by the American Dental Association and in affiliation with the American Association of Orthodontists.





Congratulations to Dr. Barone.

DENTAL DIRECTOR UPDATES

Samuel Zwetchkenbaum, DDS, MPH Dental Director - Oral Health Program

Pre-Dental Series

This past winter a Pre-Dental Presentation series was held over four evenings with a total of 16 students from Providence College, Brown University, and The University of Rhode Island able to hear about general dentistry and the specialties. Thanks to Rhode Island Dental Association (RIDA) members for their participation, and to RIDA for hosting several evenings and for providing pizza. This will be conducted again in January or February of 2019, but likely over a weekend day. Please contact me if you would like to give a presentation.

Rhode Island Ranked #7 in Oral Health America Report

In April 2018, Oral Health America released their biannual report, "A State of Decay",

https://oralhealthamerica.org/astateofdecay/ which describes factors related to oral health for older adults. The ranking is calculated based on factors such as rates of tooth loss, rates of use of services, Medicaid coverage, community water fluoridation, and more.

While a #7 ranking is significant for our little state, there is much room for improvement as we know that almost four in 10 older adults did not see a dentist in the past year. The Oral Health Subcommittee of the Long-Term Care Coordinating Council meets bi-monthly, and is actively working on a Senior Oral Health Plan for our state. The Subcommittee would welcome any new members, so please contact me for more information.

Medicaid Updates

Several Medicaid Dental changes took effect on July 1, 2018, including:

* Removal of restriction on posterior composites for adults

* Clarification on the prior authorization process for scaling and root planing

* Requirement of caries risk assessment when providing topical fluoride for adults

* Increase in rates for extractions D7140 and D7210

For more information, visit:

http://www.eohhs.ri.gov/ProvidersPartners/GeneralInformation/P roviderDirectories/DentalServices.aspx or

http://www.eohhs.ri.gov/ProvidersPartners/BillingampClaims/Fe eSchedule.aspx

Health Workforce Inventory Survey

For the first time, the RIDOH will be conducting a workforce survey for all dental practices to better understand the workforce issues and possible barriers to oral health care in the state. This is a great opportunity to get a whole picture of the dental workforce in Rhode Island and have your voice be heard by RIDOH.

The survey is legislatively mandated (RIGL 23-93-5) and must be filled out by every dental care practice to identify dental care needs in the State. The following information will be needed to complete the survey:

- * The Individual National Provider Identifiers (NPI) of each dentist in the practice;
- * Unique patient and visit counts for services and principal insurance type;

* Patient demographics, common conditions, and primary residence location:

- * Personnel by service category (including FTEs); and
- * The information technology system in your practice.

Offices are currently being contacted by phone for best email contact information. To encourage speedy return, the Oral Health Program at RIDOH is offering two free tickets to the first 100 offices to complete the survey to PawSox Oral Health Night on August 29th. Please see below for more information on Oral Health Night.

Oral Health Night at the PawSox

The RIDOH Oral Health Program is organizing a fun evening of baseball for all! Come join the entire dental community for a fun end-of-summer night out with the PawSox at McCoy Stadium on Wednesday, August 29th at 7:05 p.m. Oral health messages will be announced over the PA system, toothbrushes will be distributed to fans, and much, much more. Offices should purchase tickets on their own, but contact me if you'd like free tickets for deserving patients. Offices may also win free tickets by speedy completion of the Health Workforce Inventory Survey (see story above).

Ever dreamt of throwing out the first pitch? This may be your chance, so please contact me if you are interested in this opportunity!

Samuel Zwetchkenbaum, DDS, MPH

Oral Health Program, Rhode Island Department of Health Rhode Island Medicaid Program Samuel.Zwetchkenbaum@health.ri.gov

Malpractice Insurance | By Dentists, For Dentists®



Real Advocacy. Real Dentists. The EDIC Advantage For RIDA Dentist Members

Robert Bartro, DDS EDIC Board Director

Eastern Dentists Insurance Company (EDIC), the endorsed dental malpractice carrier for Rhode Island dentists, has partnered with RIDA for over 20 years. With this endorsement, RIDA members have value-added benefits as well as local representation on the EDIC Board of Directors. Former RIDA President, Dr. Robert Bartro, serves on the EDIC Board and guarantees your voice is being heard as he participates in every decision that EDIC makes and actively advocates EDIC's "By Dentists, For Dentists[®]" philosophy.

The EDIC Advantage:

- Board of Directors is comprised of dentists
- Proactive risk management program with FREE webinars earning CEU's
- EDIC's customer service team is personally dedicated to you
- Outstanding claims handling with a 92% win rate of claims that go to trial
- EDIC issues \$75* policyholder dividends to all eligible RIDA insureds

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*Excludes corporations and policies with expiring premium of \$200 or less.

2018 RIDA AWARD WINNERS

HUMANITARIAN AWARD -JOHN BIERNACKI, DMD

The Humanitarian Award is presented for outstanding public service to improve the quality of a human life. This award is for someone who has provided leadership and volunteer efforts that reflect favorably upon the profession of dentistry. These acts of kindness exhibit a significant devotion of time, talent, and energy that contribute to a legacy that is inspirational to members of the dental profession and beneficial to the community.

DR. A. JAMES KERSHAW AWARD - <u>STEVEN BROWN, DMD</u>

The A. James Kershaw Award is presented to that member of the Rhode Island Dental Association who has demonstrated honesty, integrity and who has made an outstanding contribution to the community while representing the good will of the dental profession.



RIDA GOOD CITIZEN AWARD -ANDREW GAZERRO III, DMD

The RIDA Good Citizen of the Year Award is presented in recognition of a member who has demonstrated outstanding or unusual contributions or service to the community, state, or country. This award is used to distinguish those contributions to areas such as government, environment, community, economics, public welfare and/or an activity which improves the country, state, or community.

DR. JOSEPH BOX EVERYDAY LEADERSHIP AWARD - <u>ROBERT</u> <u>BARTRO, DDS</u>

The Dr. Box Everyday Leadership Award is presented to that member of the RIDA who has demonstrated the highest level of ethics and dedication to the improvement of the art and science of dentistry. The recipient has shown exceptional involvement in, and love for, dentistry on many levels; and has shown compassion for all members in society. In addition, the recipient has earned the universal respect of his or her colleagues.

Congratulations to our 2018 RIDA Award Winners! If you would like to nominate someone for the 2019 awards, please send a letter of nomination to our Executive Office at 875 Centerville Rd., Bldg. 4, Ste. 12, Warwick, RI 02886



EDIC is the Endorsed Dental Malpractice Carrier Of



2018 Rhode Island Skilled Nursing Facilities Oral Health Report



What's Inside?



About the Oral Health Survey

Dental Care

Nursing Home Dental Programs and Preventive Visits

Barriers to Resident Oral Health in Nursing Homes

Want to learn more about oral health?

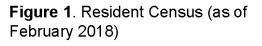
About the Oral Health Survey

Oral health is a vital component of overall health, and the Rhode Island Department of Health (RIDOH) is committed to understanding the oral health services available to and used by Rhode Islanders living or receiving short-term care in nursing homes.

RIDOH worked with the Rhode Island Long Term Care Coordinating Council's Oral Health Subcommittee to develop a survey focused on dental and oral care in long-term care facilities. The *2018 Oral Health Survey* was sent to administration-level staff at all Medicare-Certified Rhode Island nursing homes in February 2018 with the aim of gathering information about current oral health practices and opportunities to support nursing homes in their delivery of quality oral healthcare.

Participant Characteristics

Forty-six nursing homes contributed data to the 2018 Oral Health Survey (response rate: 54.8%). Figures 1 and 2 show descriptive characteristics of the facilities that responded (N=42).



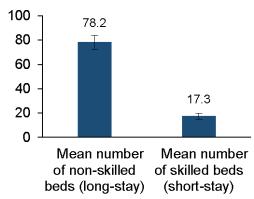
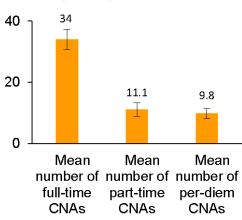


Figure 2. Staffing Levels (as of February 2018)



Almost all facilities (>40) reported regular access to mouthwash, tooth brushes, denture tabs, and denture cases. However, only 23 facilities reported regular access to dental floss.

15 facilities reported access to **Chlorhexidine**, an oral antiseptic. Chlorhexidine is available by prescription and is used to reduce plaque and gingivitis when ideal brushing and flossing is not achievable (e.g., in cases of care-resistant behavior).

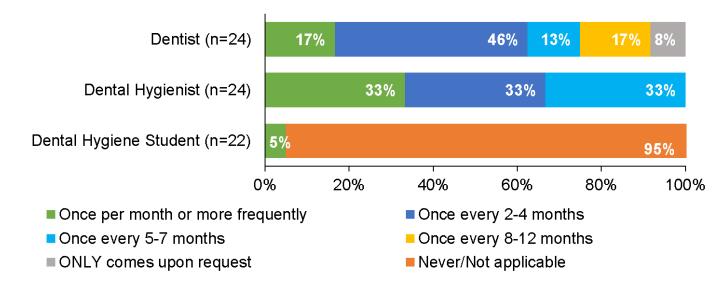
Two facilities had ultrasonic dentures cleaners. These may be more effective in disinfecting dentures than tablet cleaners alone. **13 facilities** reported access to **sodium fluoride 1.1% gel**. The gel is available by prescription and is recommended for older adults who are at higher risk of tooth decay from dry mouth due to side effects of some medications.



Dental Care

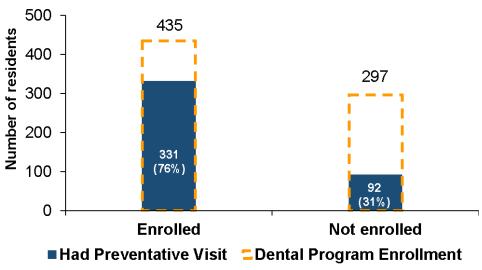
The 2018 Oral Health Survey asked participants how frequently dental care providers visit the nursing home to care for residents. **Figure 3** displays how often dentists, dental hygienists, and student dental hygienists visited Rhode Island nursing homes.

Figure 3. Frequency of Dental Care Provider Visits to Nursing Homes



Nursing Home Dental Programs and Preventive Visits

Figure 4. Number of Nursing Home Residents Who Received a Preventive Dental Care Visit, By Enrollment Status in The Facility's Dental Plan¹



¹Survey respondents who provided valid data for whether their facility had a dental program and whether residents had a preventive visit during calendar year 2017. 76% of nursing home residents enrolled in a facility's dental program had a preventive visit in the last year compared to 31% of residents not enrolled.

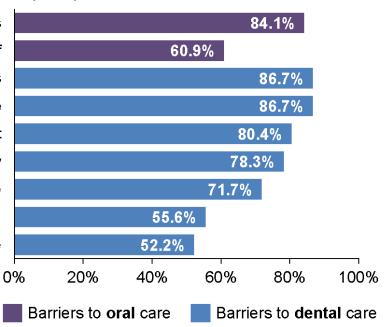
Older adults with compromised oral hygiene from dexterity or cognitive changes and those with dry mouth symptoms benefit from more frequent dental evaluation and preventive services.



Barriers to Resident Oral Health for Nursing Homes

Figure 5. The Percent of Facilities That Reported the Following Barriers to Providing or Facilitating Dental Care or Oral Care Were "Significant" or "Very Significant" (N=46)

Resistance to getting oral care by residents Time constraints on facility staff Resistance to getting dental care by residents Financial concerns of resident representative Financial concerns of resident Availability of specialty dentist to residents at your facility Availability of specialty dentist to residents at a private office Resistance to getting dental care by resident representatives Availability of non-facility transport to offsite dental care



More than 80% of participants reported that the financial concerns of residents, resistance to getting dental care by residents, and resistance to getting oral care by residents were significant or very significant barriers for delivering and/or facilitating dental care or oral care for nursing home residents.

Want to learn more about oral health in Rhode Island?

Rhode Island Department of Health Oral Health Program

Samuel Zwetchkenbaum, DDS, MPH Dental Director, Oral Health Program Samuel.Zwetchkenbaum@health.ri.gov

2018 Skilled Nursing Facility Oral Health Survey

Emily Cooper, MPH Healthcentric Advisors ecooper@healthcentricadvisors.org

Rhode Island Department of Health

3 Capitol Hill, Providence, RI 02908 Health Information Line: 401-222-5960 / RI RELAY 711 http://health.ri.gov/oralhealth

WILL YOU SEE THE 3,000TH RHODE ISLAND DONATED DENTAL SERVICES (DDS) PATIENT?

As of June 29, volunteer dentists and labs in Rhode Island have served 2,974 DDS patients in need since the programs inception in 1989. Will you be the volunteer that serves the 3,000th DDS patient?

Join the network of 181 volunteer dentists and 34 volunteer labs in Rhode Island serving the elderly, people with disabilities, or people who are medically compromised.

Volunteering is easy – you see pre-screened patients in your own office and on your own treatment plan. Lab work is donated at no cost to the dentist, and the Dental Lifeline Network • Rhode Island coordinator handles the paperwork.

"Everyone who comes in contact with a DDS patient feels good about what they did that day – knowing they are helping someone who otherwise wouldnt get help," said Dr. Marty Nager, DLN • RI Board President and DDS volunteer since 1989.

Patients are incredibly thankful for the work volunteers provide. One of Dr. Nager's patients expressed her sincere gratitude:

"I have realized that people who are kind are actually the richest, because they are giving away kindness, something that can never be taken or stolen. I am very grateful for the dental care you have given to me – what your (practice) has done for me is something that can never be forgotten."

Will you see one patient through DDS? We need your help to reach our goal! To volunteer and learn more about the Rhode Island DDS program, visit WillYouSeeOne.org or contact Rhode Island DDS Coordinator John Reeder at jreeder@dentallifeline.org or 401.825.8656.



Something to Smile About

Do you shop Amazon? If you make one small change to how you order, Amazon will donate 0.5 percent of your total purchase price to the Rhode Island Dental Foundation. The best part is - it won't cost you a thing!

Simply use the website smile.amazon.com instead of going to the traditional Amazon site. Sign in with your usual Amazon login and when prompted, insert "Rhode Island Dental Foundation" or the EIN number 05-0517366 to have donations earmarked to support foundation programs. We appreciate your support!





IN CASE YOU MISSED IT...

PAIN MANAGEMENT REGULATION UPDATES

Effective July 2, 2018, all healthcare providers prescribing controlled substances must abide by updated Rules and Regulations for Pain Management, Opioid Use, and the Registration of Distributors of Controlled Substances in Rhode Island [R21-28-CSD]. To review these updated regulations, visit: <u>http://sos.ri.gov/documents/archives/regdocs/released/pdf/DOH/9702.pdf</u>

In brief, the requirements are as follows:

Section 4.4 D.3: Patient Education/Informed Consent – Requirement for Conversation:

An important concept of the updated regulations is that before prescribing an opioid, prescribers must document in the medical record that a conversation occurred with the patient (or guardian) about the risks of the opioid medication. This is required for the second and third prescriptions as well. Patient education can be communicated orally or in writing depending on patient preference. This conversation is an opportunity to thoughtfully consider risks, and must include:

- Risks of developing dependence or addiction to the prescription opioid and potential of overdose or death;
- Risks of concurrent use of alcohol or other sedating medications, such as benzodiazepines;
- · Impaired ability to safely operate any motor vehicle;
- Patient's responsibility to safeguard all opioid medications in a secure location;
- Alternative treatments for managing pain (non-opioid medications and/or non-pharmacologic treatments); and
- Risks of relapse for those who are in recovery from substance dependence.

To fulfill this requirement, before prescribing an opioid medication, dentists can print and share RIDOH's supplementary patient education material, *Knowing the Risks of Opioid Prescription Pain Medications* (in English and Spanish), to start conversations about the risks of opioids, proper dosage, safe storage/disposal, and naloxone.

Section L: Documentation of International Classification of Diseases (ICD) 10 Diagnosis Code(s) should be placed on the Controlled Substance Prescription:

Dentists will likely use one of the following codes 95% of the time:

- K01: Impactions
- K05: Periodontal disease
- K04: Pulpal and periapical disease
- K08: Missing teeth (use for implant placement or pre-prosthetic surgery)

For a comprehensive list of ICD-10 codes, visit: http://apps.who.int/classifications/icd10/browse/2016/en or search under "ICD-10 WHO lookup." Dental codes are found in XI Diseases of the Digestive System.

Section M: Co-Prescribing of Naloxone

Prescribers must co-prescribe naloxone when:

• Prescribing an opioid which individually or in aggregate with other medications is more than or equal to fifty (50) oral Morphine Milligram Equivalents (MMEs) per day, or document in the medical record why this is not appropriate for the patient.

• Prescribing any dose of an opioid when a benzodiazepine has been prescribed in the past thirty (30) days, or will be prescribed at the visit. Prescribers shall note medical necessity of the co-prescription of the opioid and the benzodiazepine and explain why the benefit outweighs the risk given the FDA black box warning.

• Prescribing any dose of an opioid to a patient with a prior history of opioid use disorder or overdose. Prescribers must note medical necessity of prescribing of the opioid and explain why the benefit outweighs the risk given the patient's previous history.

Please note that all health insurers in Rhode Island cover at least one type of generic naloxone with a no cost/low-cost copayment. Medicaid fully covers the cost of generic naloxone and Narcan® single-step intranasal spray.

Naloxone prescription templates are available to download and print from the Rhode Island Department of Health (RIDOH) website:

http://www.health.ri.gov/forms/sampleprescription/NaloxoneF orOverdosePrevention.pdf

To learn more about the prescribing and dispensing of naloxone as well as other useful overdose prevention resources, visit <u>PrescribetoPrevent.org</u>.

Continued on page 17

Frequently Asked Questions

Q. Why were these changes enacted?

A. While Rhode Island has made strides in reducing opioid addiction and death, the goal is to reduce the incidence of opioid dependence and accidental overdose even further through patient education, communication, and risk reduction.

Q. Why all practitioners? Why not focus on those prescribing the most?

A. A "Universal Precautions" strategy is suggested to assure benefit to the public.

*Q. What are some examples of use of ICD-10 codes?*A. See below, but please note, it is highly-supported to consider a non-opioid approach in situations as appropriate:
Prescribing a narcotic analgesic after removal of impacted teeth: K01

• Prescribing a benzodiazepine for an individual with intellectual impairment prior to dental appointment as oral sedation: K05

• Prescribing a narcotic analgesic for a patient with significant dental pain either before or after root canal therapy: K04

• Prescribing either a narcotic analgesic or oral sedative either before or after dental implant placement: K08

ORAL HEALTH

Q. Will a pharmacist refuse to fill a prescription if there is no ICD-10 code?

A. No. Pharmacists have been advised to work closely with providers to help with this transition.

If you have any questions regarding ICD-10 codes or the new regulations, please contact: Dr. Samuel Zwetchkenbaum Dental Director- Oral Health Program Rhode Island Department of Health (401) 222-6079

samuel.zwetchkenbaum@health.ri.gov



Join us as the Pawtucket Red Sox take on the Lehigh Valley Iron Pigs

August 29 at McCoy Stadium gates open at 6:00pm - game starts at 7:05pm

Come join the entire dental community for a fun end-of-summer night out with the PawSox at McCoy Stadium on Wednesday, August 29th at 7:05 p.m. Oral health messages will be announced over the PA system, toothbrushes will be distributed to fans, and much, much more. Offices should purchase tickets on their own, but contact Sadie DeCourcy if you'd like free tickets for deserving patients (sadie.decourcy@health.ri.gov). Offices may also win free tickets by speedy completion of the Health Workforce Inventory Survey (see story on page)

















ADA BUSINESS MODEL PROJECT

By Judith Fisch, DDS - ADA First District Trustee

By now, you are probably aware of the Business Model Project that the Board of Trustees approved, and which development has begun. I would like to provide a bit more detail for you about the project.

While the ADA is in a strong position financially, it is also planning ahead to secure the well-being of the Association for the future. The Business Model Project is an initiative to ensure that the ADA maintains its relevance while maintaining financial sustainability. At its April meeting, the Board approved moving forward with the development of the proposed plan to pilot the service and allocated up to \$3.5 million dollars from unrestricted reserves to fund that pilot program.

The vision statement of the new service is: The ADA seeks to support independent dentistry by helping new and established dentists during their most important transitions in ways that will improve oral health and access to care.

The approved pilot has two main elements:

1) An online platform that facilitates connections between new and established dentists to aid important transitions (like finding associates or buying/selling a practice), and

2) Purchasing up to two dental practices in order to place new dentists in these practices with the express intention of selling the practice to those dentists after a target period of time. In the pilot, the project will go forward in no more than two locations.

About the Process:

• Field research done by a firm called Continuum Innovation has uncovered a need in the marketplace for new dentists and established dentists who want to connect for both employment opportunities as well as mentorship but have had difficulty doing so.

• Research also uncovered additional needs around learning skills related to basic business management, ownership, patient acquisition, purchasing, and staff relations.

• Data indicates that it is possible for the ADA to play a role in facilitating this learning and connection.

• The "definition" phase of the Business Model Project was completed in March 2018 and resulted in a defined product vision, plan for building it, and the staff plan to support it. It was completed under budget.

The service has several features:

• Profile: This is a profile that captures who a dentist is and what they currently seek. For a new dentist, this might be an associateship or the possibility of purchasing a practice. For an established dentist, this might be finding an associate or finding a buyer for the practice. This profile will be much more robust and comprehensive than anything currently available in the market. • Match: The service will have an algorithm that matches new dentists with established dentists by considering things like philosophy of care and a personality inventory as well as typical things like location and desired practice characteristics.

• Build: Once the match occurs, there will be an "ADA Mentor" coach assigned to the relationship. This resource will work with both the new dentist and the established dentist to make sure that both sides of the relationship are comfortable with the arrangement and to help them manage both their individual and mutual goals.

• Develop: Participants in the service will be given training, some as part of the service and some at additional cost, which will help them meet their individual and mutual goals. This training will be a combination of online, by phone and in person and will run the spectrum from clinical to business to lifestyle (e.g. tips on planning for retirement).

• Transition: The goal of many of these matched relationships will be the hiring of an associate and/or the transition of the practice. In these instances, the ADA would play a role similar to the one played by employment or practice brokers in the current market. While there are certainly good brokers, the research revealed many instances of an ineffective or inefficient market relating to identifying associates and practice sales. With the foundation of the four previous elements, the new service can provide a more robust and effective opportunity to facilitate finding associates and practice sales with a higher rate of success and lower costs.

Next Steps/Pilot Phase:

• An important part of the pilot plan is to identify the role that state and local societies play in order to make this service effective. The national organization is aware of the limits in what service can be delivered in a centralized way – some portions of this service are likely better served at the local level with the support of a centralized national platform.

• In order the build this service, it will be created under a new forprofit entity with the ADA as its sole shareholder. Doing this will provide protection to the not-for-profit status of the ADA, the assets of the ADA, the intellectual property of the new service, and will facilitate the pace of decision making in the new organization. This is very similar to the set-up of ADABEI or the ADA Foundation. The new entity will have its own Board who will be accountable to the ADA Board of Trustees.

As we move forward with the pilot phase, we will gain more information and insight and will continue to reassess prior to moving to the subsequent phase.

If you have any questions about this project, please feel free to contact me at fischj@ada.org.

Judith Fisch, DDS

ADA ENDORSED PROGRAMS



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NEW MEMBERS

Please welcome the following dentists as new members of the RIDA

Jong Hoon Park, DMD

Tufts University School of Dental Medicine, 2015 Employed: 885 Smithfield Ave., Lincoln, RI

Samantha Ward, DMD

Tufts University School of Dental Medicine, 2018 Employed: 460 South Main St., Woonsocket, RI

Katelyn Allen-Tobolski, DMD

University of New England, 2018 Employed: 1347 Hartford Ave., Johnston, RI

RETIRED MEMBERS

Be sure to thank these members for their commitment to dentistry as they enter retirement

Elizabeth Costa-Carroccia, DDS 34 years of membership

William Sullivan, DDS 50 years of membership Michele Diamond, DDS University of Maryland Dental School, 2017 Graduate School: RI Veterans Affairs Medical Center, 2018 Employed: 4995 South County Trail, Charlestown, RI

Colleen Ahern, DMD

University of New England, 2018 Employed: 4995 South County Trail, Charlestown, RI

Sarah Bolis, DMD

Tufts University School of Dental Medicine, 2017 Graduate School: University of Pittsburgh Medical Center, 2018 Employed: *currently looking for associateship*

IN MEMORIUM

Anthony Caputi, DDS

RIDA CALENDAR

AUGUST

- August 13
 Victory Day
 RIDA Office Closed
 August 17
- Oral Health Fair Warwick Mall
- August 24
 New Dentist Event 6:00pm
 East Greenwich Yacht Club
- August 29
 Oral Health Night 6:00pm
 McCoy Stadium

SEPTEMBER

- September 3 Labor Day RIDA Office Closed
- September 11
 RIDA Board of Trustees Meeting
 RIDA Executive Office 6:30pm
- September 19 "Bottom Line Boosters" Presented by Timothy Bizga, DDS 9:00am-4:00pm Quidnessett Country Club

OCTOBER

October 9

- RIDA Board of Trustees Meeting RIDA Executive Office 6:30pm
- October 18-22
 ADA Annual Meeting
 Honolulu, HI

CLASSIFIEDS

Endodontist wanted for multi-location endodontic practice RI and MA. One to two days a week to start with opportunity to expand hours. Please contact Dr. Mosca at 401-7490-7233 or mbm@drbentomosca.com.

Associate Needed - General Dentist in Dayville, CT (just over the RI line). Very busy, modern, well established office. Looking for 2-5 days per week. Office has 3D pan, E4D crown system, perio program in place with hygiene. Pay based on experience. Please send resumes to: 24 Putnam Pike, Dayville, CT 06241

Dentist office available for rent in East Providence RI, different option available please call Simon 508-496-9585 for more information.

NOVEMBER

- November 7* "Medical Emergencies" Daniel Pompa, DDS 9:00am-4:00pm Quidnessett Country Club
- November 12
 Veterans Day
 RIDA Office Closed
- November 13
 RIDA House of Delegates Meeting
 RIDA Executive Office 6:30pm
- November 22
 Thanksgiving
 RIDA Office Closed

DECEMBER

- December 8* Children's Holiday Party 10:00am Cornerstone of Faith UMC, Coventry
- December 11 RIDA Board of Trustees Meeting RIDA Executive Office 6:30pm
- December 25
 Christmas
 RIDA Office Closed

JANUARY

- January 1
 New Years Day
 RIDA Office Closed
- January 31 February 2 Yankee Dental Congress Boston Convention Center

* Please note changes to these dates since the last Journal publication. ** All dates are subject to change. Please check the website for any updates.





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This years' Children's Holiday Party will be on Saturday, December 8th from 10am-12pm at the Cornerstone of Faith United Methodist Church located at 1081 South Main St., Coventry, RI. All RIDA members and their children or grandchildren are invited, ages infant-12 years old. We will have breakfast, crafts, entertainment, and a visit from Santa! Like last year, we will be collecting new, unwrapped toys as gifts for the less fortunate children in our community.

Please keep an eye out for your invitation this fall!



RHODE ISLAND DENTAL ASSOCIATION 875 Centerville Rd. Bldg. 4, Suite 12 Warwick, RI 02886

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