

8th District Bulletin

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IN THIS ISSUE

- * GEIS AWARD
- * CITY OF GOOD DENTAL NEIGHBORS
- * ADA HOUSE OF DELEGATES

**8th District
BULLETIN**

**Eighth District Dental Society
of the State of New York**

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The Dental Society is organized for the purpose of encouraging improvement of the health of the public, to promote the art and science of dentistry, and to represent the interests of the members of the profession and the public which it serves.



Content

From The Editor	2
From The President	4
Executive Director's Notes	5
Geis Award	7
Trustee's Corner	9
Shred Day	13
City of Good Dental Neighbors	12
Calendar	15
ADA House of Delegates	16
Risk Management Insights	19

From The Editor

The American Dental Association was founded in Niagara Falls, NY on August 3, 1859. In the late 1800's, the ADA became the National Dental Association when it merged with the Southern Alliance and some other regional dental groups. It became a tripartite organization in 1912 when the NDA reorganized by codifying the constituent dental societies as member of the organization. This reorganization became fully implemented in 1914 and this is seen as the beginning of the modern ADA. The NDA was renamed the American Dental Association in 1922 and has existed as such since that time. At its beginnings, each constituent society had to guarantee two thirds of its members would be members of the national organization. Following this reorganization, membership in the ADA was a requirement of all members. 1



Since that time, the ADA has required membership in the ADA, the constituent dental society, and the local component dental society. Recently, the Board of Trustees of the California Dental Association voted unanimously to drop the requirement for ADA membership as a requirement for CDA membership. I thought at the time I heard this, not a good idea. The more I thought about it, the more I knew it wasn't a good idea.

Continued on Page 3

From The Editor

Continued from Page 2

The Tripartite organization of the ADA is a very important part of the membership in the ADA. The tripartite allows the ADA to act on behalf of all dentists to improve our promotion of good oral health in the general public and protect the profession of dentistry. It helps the state and local dental societies accomplish the same thing. When someone has a question about anything dental, they look to the ADA for guidance. The ADA is able to address these concerns with its team of trained spokespeople. State and locally, the ADA adds heft to our arguments. **2**

The ADA advocates for us on a national basis about all issues involving oral health. It advocates for us before Congress and federal regulatory agencies. Recently, Congress passed the Competitive Health Insurance Reform Act limiting the antitrust exemptions insurance companies enjoyed under the McCarran-Ferguson Act, largely due to the actions taken by the ADA on Capitol Hill. They continue to advocate for licensure portability, an important issue in today's environment.² The ADA conducts research on our behalf allowing for the development of evidence-based guidelines driving delivery for optimum oral health. It provides expert testimony in areas of controversy, such as the use of dental amalgam and water fluoridation. The ADA Standards program covers almost all aspects of dentistry. These standards provide for the safety, reliability, and efficiency for dentists to treat their patients to the best of their ability. They allow the dentist to choose the best possible treatment for their patients, so patients receive the best possible care. **2**

More importantly, the ADA provides support to the state and local dental societies. It provides important infrastructure to assist the state and local dental societies in their work with its members. The ADA promotes best practices and provides toolkits for a variety of issues. By doing this, it helps the state and local societies provide needed help when faced with the various issues we all know and love. This frees up time for the state and local societies to advocate for the issues important to them without having to do all the leg work collating data and information themselves. **2**

There is no question the ADA is a leading force in dentistry as it represents and advocates for the interests of dentists, patients, and the dental community. There is also no question the tripartite organization of the ADA serves as a catalyst to amplify the voices of dentist nationwide. The ADA advances policies and legislation fortifying oral health, dental education, and enhancing dentistry as a whole. The policy advocated by the CDA's Board of Trustees puts all this at risk.

The ADA's tripartite structure will be challenged by not requiring membership in all three legs of the tripartite structure. The move by the Board of Trustees in California will take out one leg of the tripartite structure. This will do a great deal of damage. California represents 17% of the ADA's membership. The loss of dues income could potentially reach over \$10 million. This puts the ADA in an untenable position for continuing to provide for its members and advocating on their behalf. Losing 17% of the members will be a blow to the ADA's market share across the country. This would dramatically change the landscape of organized dentistry. **3**

The California Dental Association Board of Trustees has withdrawn this resolution for the November meeting of their House of Delegates for reworking. The resolution garnered significant opposition across the country. I applaud this opposition. However, they are "reworking" the resolution and intend to re-introduce it at the 2025 CDA House. If the reworked resolution contains any provision not requiring membership in the ADA, it could be the first step on the road to the downfall of the ADA. The ADA has been an important part of my professional career. I am nearing the end of that career, but I am not thinking about me. I am thinking about all the dentists who are coming after me. What will the profession of dentistry be without the ADA?

It seems that what starts in California gradually moves east. My desire is this idea goes no further than a bad idea at a poorly chosen time, and the CDA Board of Trustees decide to abandon it. That will be best for California, best for the ADA, and best for dentistry.

1. Private correspondence, Dr. Lawrence Volland
2. Email, ASCDE, "An Open Letter to ADA Members, The Value of a United Tripartite and the ADA"
3. Private correspondence, Dr. Raymond Miller

From The President



“Buffalo versus Albany: A Tale of Two Cities”

Unfortunately, at the time I’m writing this, Buffalo has been dragging its proverbial feet in following-through with its guarantee that fluoride would be returned to the city’s water supply. The usual government excuses are provided, and that’s assuming you even get one.

Just down the I-90, lies one of Buffalo’s friends to the east: Albany. There, with a difference of only around 250 miles, is quite a different story.

In mid-October, Albany Common Councilman, Mr. Tom Hoey, introduced legislation that if passed by the council and mayor, would fluoridate the city’s water supply for the first time ever; something that would benefit its 100,000 residents. Mr. Hoey also chairs the city’s public safety committee. Prior to that, as municipalities began to fluoridate their water systems, the 11-term mayor of Albany at the time, Erastus Corning, II, was against it and never pursued it.

The current mayor, Kathy Sheehan, has quite the different viewpoint. She hopes the bill moves expeditiously through the common council so she can sign it into law. According to Mr. Hoey, a majority of council members have committed to backing the proposal. They say the benefits are overwhelming and it can be a basic, first line of defense against cavities, especially in underserved areas. At least one city is moving in the right direction, right down the 90. I certainly applaud and support Albany’s efforts and hope some members of Buffalo’s government learn a thing or two.

I would like to take this opportunity of personal privilege, upon writing my last Bulletin article, to take a moment and appreciate all of the tremendous, numerous and momentous accomplishments of the society this year. As an organization, we faced many uncharted obstacles and came out stronger than ever. I’d like to start by thanking the amazing staff of your Eighth District Dental Society - namely John, Dana and Kari - whom are the true unsung heroes of the organization. It is clear and obvious that without them, our society would cease to exist. I would also like to thank all of my colleagues, friends and family that made this challenging year much easier to handle. Its members like you that made this journey such an inspiring and rewarding one. I welcome our new Board Members and general members ... and we are always looking for fresh blood and idea. Stay involved! Here’s to a great 2024!

2022 NYSDA Continuing Education Awards

The Eighth District Dental Society would like to congratulate its members listed below who have reached significant milestones in attendance at Continuing Education programs throughout the end of 2022.

<u>2500 Continuing Education Hours</u>	<u>2000 Continuing Education Hours</u>
Dr. Glen Donnarumma	Dr. Anthony Laformara
<u>1000 Continuing Education Hours</u>	
Dr. Samuel Goodloe * Dr. Sanil Nigalye * Dr. Frank Barnashuk	

Executive Director's Note

By John D. Craig, PhD

This is the final bulletin for this year 2023 and we hope membership support has been consistent, supportive, and encouraging to all our Life, Continuing, and New Members. I will be starting my 3rd year as your ED on November 1st, and I have learned quite a bit each and every day in the office. If you have called the Society Offices to inquire about an issue or concern, I hope we were able to answer it in a meaningful and helpful manner. For some inquiries, I rely on my great staff of Dana Skinner-Roberson and Kari Hicks. If they don't know the answer, I do the research, contact others, or seek out counsel from our state and/or national association. They are always eager to share insights and support when we aren't completely sure of a guideline or policy. In turn, we work to share those responses as quickly as possible.



As things wind down, there are still many activities on the calendar for participation. Appreciation Dinner meeting, Dr. Richard Fink Memorial Lecture on Friday, December 1st, the annual Holiday Party, Saturday, December 2nd for families as well as end of the celebrations with partners and others. We are also seeking input on services for our new year in 2024. As with the ADA, their budget process for the new year will consist of allowing underperforming services to end or discontinue in 2024. Some of this change is to be more focused on strategic forecasting issues and provide in time support for those immediate concerns, rather than waiting 10 months for the next HOD and then take action.

To that end, we are also seeking new ideas and strategies that are helpful and requested. This year we piloted the Employee Assistance Program (EAP) a partnership with Child & Family Services in WNY. We need to weigh these programs against cost and utility, and then determine whether the investment in these kinds of supports is worth it or to let it become a nice attempt to assist members, but not very effective in meeting intentions. Continuing Education (CE) has long been a staple of our Foundation and outreach. While we don't provide an array of ongoing options, like the dental school or other sponsors and providers of educational programming, we try and stay in our lane and support the required courses licensure needs. We hope in 2024 to create a focus group on CE to better understand the needs of members and to provide topics, activities and events that will lead to more participation. This is a national concern of all association components – lack of CE registrations, it's not a WNY issue.

In speaking with many members this year, the workforce needs in both dental hygiene and assisting are paramount and front and center in many practices. Graduates from local and regional accredited programs are becoming more important, while enrollments have shifted downward in the last few years, so the pipeline for new recruits is lower. We know academic programming or new efforts to start-up programs can take years to assemble and get new replacements for these openings. The timeline for immediate relief appears a long way off. Innovation and unique ways to train young people are needed and can be accomplished. The approval process in NYS and CODA are still a long and winding road. Hopefully, we can find ways to promote the career pathways in our Society by going the extra mile to inform and educate. New workforce committees are forming and seek to find solutions.

Finally, I want to share a heartfelt holiday seasons greetings to all our members and partners. This time of the year is magical for our children and families, but also a reflection of the past year's events with an eye towards the new year and a fresh start. This year let's celebrate those around our tables, not necessary what's around our trees and holiday symbols. Please contact me if you have questions – jcraig@8ddsny.org. Thank you for your support and I'll look for you in 2024.



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Dental Society
Member

Geis Award Presentation

Dr. Chester Gary received the 2nd place Geis award for his editorial "Beyond Diversity, Unity and Innovation", published in the NYSDJ in January 2022.

This award was presented by Dr. Karen West, President and CEO of the American Dental Education Association, on October 5, at the Hyatt Regency Orlando at the American Association of Dental Editors and Journalists Annual Conference.

Since 1958, the Gies Editorial Award has been presented yearly to the author of the most valuable editorial published in a dental journal or periodical from those submitted.

This award recognizes the contributions of dental editors and journalists who share and demonstrate a commitment to establishing and encouraging responsible editorial policy.



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Save the date!

2024

The EDDS Member-Only **SHRED DAY** will be held on Saturday, June 22nd from 10am to 1pm

This free event allows our members to bring in their paper files and X-Rays to be recycled.

More info to follow in the Spring! Stay tuned!



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Trustee's Corner

Third letter from the ADA Trustee to the NYSDA Components – September 2023

As we reach the Fall season, I would like to take this opportunity to thank all of you for letting me serve as your Trustee to the Second District. It has been a challenging and rewarding experience and I look forward to representing you over the next three years. Since my last correspondence, there has been a lot happening at the American Dental Association and I will try to give you as much information as possible. As many of you know, the California Dental Association's Board of Directors unanimously passed a proposal this past spring to put a resolution before the California House of Delegates that would allow their constituent/component members the option of joining the ADA, beginning in January 2025. After an intense and thoughtful debate through the summer, the CDA Board decided to recalibrate and not bring a resolution forward to the California House of Delegates this November.

It is critically important to understand the ADA Board of Trustees does not want to go down this road. We believe the Tripartite and the Power of Three is paramount to our accomplishments. The Tripartite has been in existence for 110 years and has been intimately associated with our success as an organization and a profession. Whether it is advocacy, science, continuing education or helping members succeed throughout their career journeys, the ADA is stronger when we are together. The ADA looks forward to increasing and promoting the value of membership to all dentists. We feel strongly it will be a better ADA in the near and distant future with the Power of three including the entire country.

Many members do not realize how much the ADA can help as you progress through your career. We are there for evaluating employment agreements. We also have debt management tools and can offer financial planning. A good number of us have taken advantage of the group insurance programs, including the life insurance and disability plans. The ADA can assist with physical and mental wellness, and we have a yearly meeting devoted to this topic. The ADAPT (American Dental Association Practice Transitions) program connects a large network of member dentists who are buying or selling practices, hiring associates or in the process of looking for new employment. All these wonderful services are available at your fingertips by contacting the American Dental Association or going onto ADA.org. We are also open to new suggestions from members if you feel it will help individual dentists, our association, and/or our profession. You can contact me anytime you would like. My information is at the end of this letter.

At my last correspondence with you, I discussed the dilemma of decreasing membership. The ADA is strongly looking at new solutions to counter this long-term trend. As we speak, a group is working on a new membership model. A tiered model framework is being developed over the next few months which will be shared with the state and local organizations soon after. The tiered membership model is scheduled to be completed by March of 2024. The Strategic Forecasting Committee and an Action group will be assisting with the intricate details of the plan. Our new information technology platform, Salesforce/Fonteva, will be launched in early July of 2024. This will allow us to use a new billing system in a much easier manner than by using our current system, Aptify. The billing process for the 2025 dues will be completed in October 2024 using the new platform and utilized by the end of the year.

The ADA Board of Trustees met in Chicago from July 30th until August 1st. I can report to you that your ADA is financially strong, even with the decrease in membership. Our non-dues revenue has helped keep us monetarily

(Continued on Page 10)

healthy. Our recent external audit report for 2022 received an unqualified opinion by KPMG. The ADA Board of Trustees will begin a new budgeting process to a 12-month, rolling mission-based budget, starting in November. It is expected that the transition to a mission-based budget will assist in identifying the need for cessation of certain programs due to those programs' ineffectiveness to generate metrics that support positive movement in supporting the ADA's strategic forecast. The ADA Board will be assisted along the way by Action groups from the Strategic Forecasting Committee, which is a committee of the ADA House of Delegates. This way the House has input throughout the entire year, instead of just during the annual meeting.

On March 24th this year, ADA President George Shepley was able to attend the White House Conference on Hunger, Nutrition and Health, at the White House in Washington, DC. Dr. Shepley created the ADA Task Force on Sugar, Nutrition and Diet, which has had a very productive year. They have met virtually several times, reviewing existing ADA policy on the three subjects. They also agreed to new recommendations concerning healthy foods, avoiding ultra-processed foods and promoting access to potable water. Future ideas include educating dental students, prevention and patient education, more interprofessional education and an increase in dental research. The task force was approved for another year to have the Council on Scientific Affairs explore the feasibility of developing science-based guidelines to document the impact of added sugar consumption on oral health outcomes and to develop an action plan to educate the public on foods with added sugar consumption as it relates to oral and systemic health.

I would like to thank every one of you for your membership. As I mentioned, I have been honored to serve as the ADA Trustee for the Second District. My second year begins at the conclusion of the ADA annual meeting in Orlando in October. I wish all of you and your families the best in the coming months and I will be in touch with you with another Trustee's Corner in the beginning of 2024. If you need to contact me, my email addresses are drndowd@gmail.com and dowdb@ada.org. My cell number is 716-510-3217.

Sincerely,

Brendan Dowd, DDS
ADA Trustee, Second District

Do some of these faces look familiar?
Congratulations to our members who attended
the FACD (Fellowship, American College of
Dentists) Convocation.

From left to right are Drs. Joseph DeLuca,
Darren Forcier, Ashleigh Robinson (nee
Machiewski), Alyssa Tzetzio, Joshua Hutter,
Elizabeth Kapral, and Genene Crofut. Missing
from the photo is Dr. Frank Sindoni.





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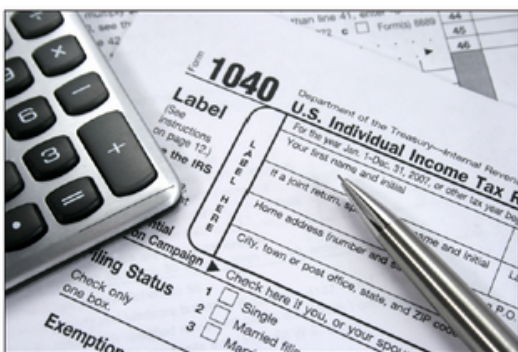
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The City of Good (Dental Professional) Neighbors

By JESSICA SCATES

The University at Buffalo (UB) School of Dental Medicine (SDM) extended its neighborhood this summer to a group of 30 prospective students, who were selected from across the nation, to participate in summer-long pathway programs: Destination Dental School (DDS) and the Native American Pre-Dental Student Gateway (Gateway) Program. Current undergraduates, graduate students and professionals, ages ranging from 19-37, joined together virtually for six Saturday sessions, followed by a one-week intensive, in-person training at UB SDM. Through lectures, hands-on activities, admissions and Dental Admissions Test (DAT) preparation, networking, and capstone research projects, students gained insight into life as a dentist and dental student, strengthened their future dental school applications and cultivated their research capacities.

Over the past five years, the UB SDM has invested significant resources into the dental pathway. DDS, a pathway program founded in 2021, aims to increase the enrollment of underrepresented students in the field of dental medicine. Founded by UB SDM Alum, Dr. Arian Johnson ('21), the program is directed by Dr. Wendell Carmona, Volunteer Faculty and Managing Clinical Director at Aspen Dental. In 2022 and 2023, Destination Dental School joined forces with UB SDM's Gateway Program, founded in 2018 by Dr. Joe Salamon, Dental Director, Seneca Nation Health System, in collaboration with the Seneca Nation Health System to advance opportunities for Native American/American Indian students.



Our nation faces many challenges to the provision of accessible oral healthcare. Almost 60 million Americans live in dental health professional shortage areas (DPSA) where too few providers are unable to meet the oral health needs of their communities. Furthermore, access to the profession is a persisting obstacle. Black, Hispanic, and Native American dentists are disproportionately and historically underrepresented by race/ethnicity (HURE) in the profession and high costs to education and corresponding high levels of debt exclude disadvantaged students. DDS and the Gateway Program are innovative hybrid, summer pathway programs that remove barriers for HURE/disadvantaged students to take their places as future dental healthcare leaders.

For this reason, UB SDM has taken a different approach from traditional pathway programs: graduates of their programs incur no cost. They receive reimbursement for travel and lodging in Buffalo, a stipend to offset costs incurred, and DAT study resources, reimbursement for a DAT test, and a waived application fee to UB SDM; all program costs and benefits totaling over \$1,500 per graduate.

Reflecting on their summer, one graduate stated "[This program] gave me a beacon of hope for my future to know that I can do it and will do it one day. I am better prepared to apply and attend dental school because of the DDS program at UB". Another graduate stated "DDS not only surpassed our expectations but also assisted in the development of confidence and a sense of belonging. Everyone we spoke to throughout this program served as a source of inspiration and motivation for us. In just three years, the DDS program has graduated over 75 fellows representing 24 states and 52 colleges and universities.

Welcome New Members

Dr. Monie Applegate	Dr. Joshua Matam
Dr. Madison Billings	Dr. Jeremy Mihnevych
Dr. Jordan Boland	Dr. Fritz Mora
Dr. Jason Ciano	Dr. Nidhhi Parmar
Dr. Sarah DeFries	Dr. Ryan Prevost
Dr. Anthony Felli	Dr. Michael Roncone
Dr. Michelle Frawley	Dr. Melina Roncone
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Dr. Madeline Harvey	Dr. Kassiani Strembenis
Dr. Cecilia Horchos	Dr. Brooke Talsania
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EDDS Members, Buyers & Sellers, and Patients

When a dental practice is sold to another dentist or DSO, there is a buyer and seller agreement which stipulates the patient treatment plan and a general understanding on how transition services and support are to be rendered. While this agreement is a private arrangement, the policing of that agreement is entirely personal and likely, in most cases, to be confidential in nature.

If the selling dentist is also retiring from professional work and is not planning to renew or keep their license, obviously their relationship to former patients is over. However, if the dentist who sells continues to practice, even part-time, is there an obligation to see or deal with former patients who are unhappy or dissatisfied with the care plan and services by the buying dentist? This can create confusion from the patient's end. They are clients that need support as well as understanding.

The buyer and seller agreement should be prepared by a legal firm and attorney who work directly with dentists or by legal counsel who understand the healthcare industry. In many respects, the medical and dental office practice are uniquely different in this continuation of care guideline. Most medical patients are referred to another practice or physician depending on the specialty and it's their choice to move freely within the system and insurance provider to locate that professional. The dental handover process is more difficult, since both insurance and quality of care are sometimes different from office to office and practice to practice.

Patients who are involved in that practice sale are subject to an array of concerns:

- * Will care be consistent?
- * Will it continue seamlessly or could there be concerns on practice management and care programming from the patient, if it changes, is modified or discontinued?
- * Has the patient care plan already been paid for in full prior to the transition or sale?
- * Does the agreement provide "credit" to the buyer whereby their dental office receives remuneration per each patient continuing treatment plan, where documented?
- * Is there an obligation or requirement on the buyer's part to support that ongoing treatment plan without charging the patient, even if the patient transition credit wasn't agreed to or provided?
- * What happens when the patient voluntarily leaves the buyers practice, who takes responsibility? Certain situations involving specialties can be an issue to find another provider.
- * What happens if the patient cannot get help from other providers? Will they ultimately contact OPD and file a complaint against the buyer and seller or not?
- * Can their case be considered an abandonment case of malpractice? Can dentists be sued for failure to provide completed care?

These are all legal questions and guidelines should be outlined in the final and agreed to practice selling agreement with the buyer. Outside parties and agents may not be privileged to know the requirements of the sale or the finer care details of patients they are taking on, but the patient also has rights for ongoing care and support. Failure to acknowledge that right and support for their oral health could result in a Peer Review claim, litigation, and perhaps serious consequences for professionals.

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CALENDAR

December 2023

Friday, December 1
Dr. Richard Fink All Day Seminar
8am, Salvatore's

Saturday, December 2
Children's Holiday Party
10am, Transit Valley Country Club

December 25 & 26
Christmas
Office Closed

January 2024

Monday, January 1
New Years Day
Office Closed

Tuesday, January 9
Executive Council Orientation
7pm, Eighth District Office

Sunday, January 14
ECDS Installation Brunch
11am, Buffalo Launch Club

Monday, January 15
Martin Luther King Jr Day
Office Closed

Tuesday, January 23
Erie County Board Meeting
7pm, Eighth District Office

Saturday, January 27
EDDS President's Reception
6pm, The Buffalo Club

February 2024

Monday, February 5
Basic Life Support
5pm, Eighth District Office

Friday, February 9
ECDS Ski Day
8am, Holimont Ski Resort

Tuesday, February 13
Executive Council Meeting
7pm, Eighth District Office

Monday, February 19
President's Day
Office Closed

ADA House of Delegates

Orlando - October 2023



The annual 2023 ADA House of Delegates (HOD) meeting this year was held in Orlando, Florida at a series of hotels and the Orange County Convention Center. The week-long engagement event started with the SmileCon segment of programming focusing on continuing education programs and workshops while supporting a robust vendor & sponsorship arena for participants.

While overall participation in the SmileCon and ADA meeting were down from the previous year, activities were plentiful for those seeking certain aspects of the career

field. The EDDS Delegate group was comprised of (see picture below): Drs. James Hoddick, Elizabeth Kapral (delegates), Raymond Miller, Joshua Hutter (alternate delegates), Frank Barnashuk (NYSDA Officer - retired), and our ADA Trustee from the 2nd District, Brendan Dowd. Executive Director, John Craig also participated in the annual session to better understand the national perspective and resolution processes.



As many members may already know, the process for strategic forecasting may reshape the work of HOD in the future, but the approval of ongoing business of the tripartite will still be conducted in this annual meeting.

The UB School of Dental Medicine held their annual meet & greet on Friday evening. Alumni Association Executive Director, Sherry Szarowski, hosted a group of alumni with remarks by the new Dean of the School, Dr. Marcelo Arajuo. It was a nice opportunity for those who live outside of WNY to gather in.

The Saturday morning session for the initial caucus review was an overview of the resolutions, pending votes for the ADA President-Elect and other appointments, as well as overviews of the EDPAC and ADPAC. Saturday's afternoon House session was an overview and an opportunity for all President-Elect/s to present their story for the pending election on Tuesday.



Sunday was a Resolution Reference Committee Day for appointed delegates to lead conversations on the pending resolutions and making any comments and possible changes to proposed policies and guidelines. Pictured to the left is a Resolution Committee from the 2nd District (New York) group. Drs. Hoddick and Kapral are seated at the end of the table

Continued on Page 17

Monday, October 9th was the final Caucus session to review the details shared at various Reference Committee sessions and offer last minute clarifications to the delegates in each group to consider those edits and gathering in a final decision to support the resolution and changes or not.



In this Resolution group, Dr. Josh Hutter (far left seated) listens to remarks from other colleagues on the issue at hand. Standing in the back is NYSDA Exec Director, Greg Hill.



Left (photo) Dr. Brendan Dowd, ADA Trustee District #2, shares insights and thoughts regarding ADA policy changes, programming and services for consideration in this year's HOD voting. Serving as Caucus Chairman of the Delegation is NYSDA President, Dr. Anthony Cuomo.



Next year's HOD meeting is taking place in New Orleans, LA in 2024

HOD Floor Orland, Florida 2023 Hilton Hotel

Volunteers Needed

The Dental office at Good Neighbors is in need of volunteer dentists and dental assistants to provide free dental care to the people of WNY.

The Dental Office operates on:
Wednesday from 8:30am - 11:00am
Friday from 1:30pm - 4:30pm

The Dental Office at Good Neighbors
175 Jefferson Ave, Buffalo, NY 14210

Please call 716-856-2400 to volunteer

Assistance for Substance Abuse and Wellbeing

The Committee for Substance Abuse and Wellbeing is in existence to help colleagues, staff or family who may have an issue with alcohol or other substance abuse. All inquiries are kept strictly **CONFIDENTIAL** and will be acted upon in a non-punitive, non-judgemental, and caring way.

If you or someone you know has an issue, please call State Chairperson Dr. Amy Bryan at 716-807-4131 or the Eighth District Chairperson Dr. Timothy Mahoney at 716-868-7512.



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Risk Management Insights

Exit Strategy: Retiring and Closing Your Practice Considerations

Whether you are retiring, selling your practice, or simply moving on, the decision is not as simple as turning off the lights, but rather includes a variety of tasks. This article is not intended as an exhaustive guide; instead, it is a primer on certain considerations to assist you in planning and executing this transition. As with all major decisions, it is important to consult with appropriate professional advisors. Laws vary by jurisdiction, and the information provided in this article is not intended to serve as legal advice. Your legal and/or financial advisors can help you make the best decisions for your individual needs.

Announce the Decision

Regardless of the reason why you are leaving practice, it is recommended that patients are notified of a change in their dental provider prior to the effective date of the change. The ADA provides a "Guide to Closing a Dental Practice" which includes a sample notification letter template. Also, consider how to transition ongoing patient care to other providers. Each patient's treatment needs can vary considerably, so it is important to approach this step on a case-by-case basis. For example, patients who are undergoing more extensive treatment may require additional referral and follow-up care to avoid allegations of abandonment once you leave.

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Risk Management Insights

Exit Strategy: Retiring and Closing Your Practice Considerations

In addition to notifying patients, it is important that you communicate this transition to your licensing board, state society, insurance carriers, and others.

Contact Your Insurance Agent

As you prepare for retirement, your insurance portfolio is likely to change. It is important to ensure adequate insurance coverage for any future malpractice claims that may arise after you've left practice. If you have a claims-made policy, ask your agent about the need for tail coverage. In many cases, tail coverage is provided for free at retirement. Your insurance agent can also guide you through any updates to your disability, life, health, and other insurance coverages.

Medical Records Management

Record retention laws vary by state. When preparing to transfer medical records, your state dental society and state dental practice act are good resources to what is required to maintain and/or transfer patient records including how to obtain proper patient authorization for disclosure, transfer, and storage of medical records. Unless your state mandates otherwise, it is important to maintain original patient records as you can be subject to medical malpractice claims years after the date you closed your practice's doors.

Transition Questions

While not an exhaustive list, you may wish to discuss the following questions with an attorney familiar with the sale or closing of medical or dental practices. These questions may also be applicable if you are leaving a practice to join a new one.

1. Will ownership of existing patient records transition to the purchaser? If so, how will I access patient records in the event litigation arises?
2. How will patients be notified of the change in their dental provider?
3. What are the requirements for record storage if I retain ownership of my patient records? Is a storage facility sufficient? Can I keep the records in my home?

Risk Management Insights

Exit Strategy: Retiring and Closing Your Practice Considerations

4. How will new providers contact me about former patients that have allegations?
5. Similarly, how will former patients or referral sources contact me for records or questions if needed?
6. Am I required to keep a phone line open for a period of time after closure of a practice?

Hazardous Material Disposal

Federal and/or state laws may dictate how certain hazardous materials are disposed. It is crucial that you dispose of waste items and medications in the proper manner. Inappropriate disposal could result in fines and penalties from regulatory agencies.

Transitioning Due to Disability

Despite best efforts to plan ahead and prepare for a transition when you near retirement-age, unforeseen circumstances, such as becoming disabled, can require you to adapt your plans. Obtaining appropriate levels of disability insurance can help provide financial support if disability should occur. Your local Fortress agent can review your portfolio and make recommendations to help ensure you have appropriate coverages in place. Additionally, resources and organizations, such as the [American Association of Disabled Dentists](#), exist to support dentists through this phase.

Resources

[ADA's A Guide to Closing a Dental Practice](#)

[ADA Practice Transitions: Know Your Options: How to Build the Right Exit Plan for You](#)

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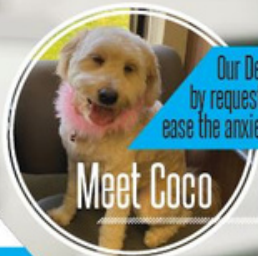
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