

Bulletin



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A Brief Overview of Law and Policy Issues Related to “Corporate Dentistry”

By C. Scott Litch, Esq., CAE, Chief Operating Officer and General Counsel,
American Academy of Pediatric Dentistry¹

Introduction

Recent media attention has been given to perceived abuses by corporate dentistry, although this term is often loosely, if ever, defined in such accounts. It is clear that pediatric dentists often incorporate their practices as 51.3 % of pediatric dentists practiced as corporations in 2009.² Many pediatric dentists also work in group practices; 29 percent of pediatric dentists are in practice partnerships of some type.³ One could hardly argue that a solo versus partnership or small versus large group practice is inherently preferable to the other. All have pluses and minuses. These types of dental practices have developed over time based on market forces and scientific developments and will continue to do so.

However, when non-dentists are involved as investors, owners, or managers of dental clinics, there are at least two basic policy questions for consideration by state (and sometimes federal) regulators:

- What level of involvement in a dental practice by a non-dentist raises an inherent risk to patient care and safety?
- Can such risk be mitigated by allowing involvement in a dental practice by a non-dentist (ranging from ownership to consulting services) so long as non-dentists do not make clinical decisions, dictate clinical practices, or interfere with the professional judgment of dentists in the practice?

State Dental Regulation of Dental Practice Ownership

States regulate who can own and operate a dental practice, employ a dentist, and determine the level of control non-dentist owners and managers may exercise over a dental practice.⁴ At present, many state practice acts specify that only a licensed dentist can own and operate a dental practice, including hiring other dentists. In others, there is more leeway. According to the American Dental Association (ADA) Department of State Government Affairs⁵:

- Twenty-five (25) states and D.C. define the ownership of a dental practice as an element of practicing dentistry.
- Four (4) states prohibit non-dentists from operating dental practices, although enforcement of such provisions may vary.
- Four (4) states either have no laws addressing the issues of ownership and control, or have provisions that provide no guidance on how to classify those states.
- Twelve (12) states allow a person or legal entity not licensed as a dentist in the state to participate in the ownership of a private dental practice. In California, a 2003 law allows physicians, surgeons, hygienists, and assistants to own up to 49% of a dental practice.⁶

Nuances have to be examined for each state. For example, the ADA reports⁷ that in Colorado the dental practice act is preempted by a law allowing non dentist ownership if the dental practice is part of a provider network. The Indiana Attorney General has issued an opinion that although non-dentists may not be involved in the direction, control, and treatment of patients, they are not prohibited from owning dental practices. The Maryland Attorney General concluded that a non-dentist is prohibited from owning or operating a dental practice, but that some forms of business arrangements may be permissible. The Ohio Attorney General issued an opinion stating that Ohio law does not prohibit

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For a complete list of committee members visit the CSPD website at www.CSPD.org

California Society of Pediatric Dentistry

BULLETIN

CSPD members are encouraged to contribute to the Bulletin. Articles, Letters to the Editor, or other items of interest are welcome. Items for publication may be submitted to Gary D. Sabbadini, DDS by mail (1500 Tara Hills Dr. Suite 100 Pinole, CA 94564 or GarySab@comcast.net).

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MISSION OF THE BULLETIN

The Bulletin of the California Society of Pediatric Dentistry shall be to examine and identify the issues that affect the specialty of Pediatric Dentistry and the oral health of teenagers and children. All of our readers should remain informed and participate in the formulation of public policy and personal leadership to advance the purposes of the Society. The Bulletin is not a political publication and does not knowingly promote the specific views at the expense of others. The views and opinions expressed in the Bulletin do not necessarily represent those of the California Society of Pediatric Dentistry.

Member Publication

AADE
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President's Message

The Dark Side

Steve Chan, DDS, CSPD President

"The time has come to talk of many things" – The Walrus in Alice in Wonderland

The CSPD Board of Directors met on 9/15/12 in Oakland, CA. This was the first time in many years that the CSPD Board Meeting has been held in the North. The Board welcomed new CSPD South Director, Jacob Lee from San Clemente. Liz Snow, Chief Operating Officer of CDA, joined us as the liaison from CDA.

Among the many good works of CSPD Past President, Santos Cortez, is the Leadership Development Committee's ongoing program to present topics on leadership skills at the scheduled Board meetings. Under the mentorship of Board member Jennifer Hendershot, our Warren Brandli Intern, Suzy Tavana, gave a masterful summary of "Harnessing the Science of Persuasion" by author Robert Cialdini. In this book, he describes the following principles of liking, reciprocity, social proof, consistency, authority, and scarcity in the science of persuasion and influence. One of Dr. Tavana's colleagues gave this presentation to the Board of the Western Society of Pediatric Dentistry and received rave reviews!

Because our publications are reaching a broader audience, the content of these publications must reflect the principles of the organization. To ensure we are consistent, the Communications Committee reviewed and updated the advertising guidelines.

The CSPD/WSPD Annual Meeting brings people together. As this show grows, the challenge is to bring out the best in our members, our staff, our sponsors, and our volunteers. The Board discussed how best to organizationally structure our most valued resource – our member volunteers.

The Padilla Bill, which proposed creating a State Dental Director position and a research study on workforce functions, died in the Appropriations Committee. No funding equals no bill. We learned a great deal about how information moves through organizations. The author and the Children's Partnership sponsor are not yet done yet. You can read more about this in Paul Reggiardo's report.

The Panel Discussion sponsored by the CSPD Foundation at the Annual Meeting usually tackles a tough issue facing our profession. At the 2013 Annual Meeting in Rancho Mirage, the CSPD Foundation Board chose the Affordable Care Act as the next mega issue to address. What it means in California and for children's oral health is not yet defined. The Board spent some quality time to design the course content. They seek to understand how the Affordable Care Act will affect our practices, our profession, and our patients.

On September 14, CSPD and CDA co-sponsored a course in Sacramento entitled "Social Media: The Risks and the Rewards." Since pediatric practices see a high volume of patients, they have

a greater chance of experiencing the downside of social media. Risk managers offer solutions to prevent or mitigate the pitfalls of social media by learning from case histories. This successful course will be offered at CDA Presents at an upcoming Session.

We're continuing with the integration of Smith Moore & Associates, the association management company, which provides our administrative services. Key CSPD leaders are working with Smith Moore & Associates' counterparts in the areas of finance, IT, communications, and meeting planning. Smith Moore & Associates is hitting its benchmarks in the time table of integration.

CSPD representatives to the Western Society of Pediatric Dentistry (Oriona Lowe, Sara Ghaemmaghami, Rebecca Lee, and Steve Chan) recently attended its semi-annual Board meeting in Seattle. We were very interested in the political moves that were made. Washington State grappled with the issue of expanded function auxiliaries, the political/legislative forces, the opposing forces, and the best alternative that Washington State Dental Association could muster.

By the time you receive this issue; the ADA Annual Session will have come and gone in San Francisco. Of particular interest to pediatric dentistry is whether the House of Delegates approved dental anesthesiology's bid to be granted specialty recognition.

Of personal interest, is the move by the ADA to close the ADA Library. They cite rising costs, space requirements, and underutilization as the driver for the move. Combining these elements with the push to digitize information has led to the sum total of the profession's archives and history being on the brink. Once upon a time, at some leadership conference at the ADA, I had a free afternoon. As a former Library Commissioner for my city, I was curious to see what was in the ADA Library. To my delight, I found the entire collection of my local dental society's newsletters ... from the inception!

I actually touched a book authored by Pierre Fauchard. I read G.V. Black's original text on operative dentistry. By time you read this, either the news of the ADA Library, or the Library itself, will be history.

On November 9 the CDA House of Delegates convenes in Newport Beach. Once upon a time, there were only three or four pediatric dentists in the CDA House of Delegates. In California, CDA is the organization with the clout and resources to move the profession. Now we have over a dozen pediatric dentists in the House to help shape our future. We congratulate Lindsay Robinson, past CSPD President, as she ascends to the Presidency of CDA.

The Scarecrow, of Wizard of Oz fame, once remarked, "Sometimes, it's good to pause and reflect." Pardon me, while I pause and reflect.

Executive Director's Message

The Calm Before the Storm?



Ray E. Stewart, DDS, CSPD Executive Director

The past quarter has been very busy and productive. The CSPD Board and Annual Meeting Committee have been hard at work planning for the 2013 Annual Meeting which will take place April 25-28, 2013. This past September, CSPD collaborated with CDA to produce the first ever joint venture in Continuing Education. The course was entitled "Maximize Social Media and Minimize Risks." If you weren't able to attend, you missed a good one! With all of the adverse outcomes related to social media that have been experienced by several CSPD and CDA members over the past several months, this program provided sage advice and strategies on how to effectively engage in the various social media enterprises and avoid the potential pitfalls associated with these endeavors. By all measures, this joint program was a major success thanks to the hard work and dedication of Mary Sobieralski and the CDA and TDIC staffs who gave excellent presentations - all without compensation.

If you were unable to attend this program, you will not want to miss the next great CSPD continuing education course, "The Affordable Healthcare Act – Its Effect on Pediatric Dental Practice," that will be sponsored by the CSPD Foundation. It is scheduled for Thursday, April 25, 2013 just prior to the Welcome Reception at the 2013 Annual Meeting Welcome Reception at Rancho Los Palmas in Rancho Mirage. We have scheduled an all star panel of experts to give presentations and lead a discussion on the how the Affordable Healthcare Act may affect the dental profession. This is a "must attend" if you are interested in learning about the evolving health care legislation, its general influence on the practice of dentistry, and particular emphasis will be given to the impact it will have on the dentists in California.

The ongoing transition of many of the administrative functions of the organization from the Executive Director to the Association Management Company, Smith Moore & Associates,

has proceeded quite smoothly. Simone Parker, the Meetings & Membership Assistant assigned to our account, has been exceedingly efficient in the transition process. She will be the person to field your calls should the need arise for direct contact with the CSPD office. If there are any urgent issues requiring my attention, your call or message will be promptly routed to me and you can expect to hear from me directly with a phone call or an e-mail within 24 hours. You can also reach me at any time on my private telephone line (831-594-3523). Be assured that all executive functions of the CSPD Executive Director's office are maintained just as they have been for the past two decades and will remain so until the Board of Directors determines that this office is no longer an important element in the way CSPD does business.

On another note, most of you are probably aware of the fact that SB 694 (Dental Access) failed passage in the state Senate. The reason for this failure centered on concerns about the precedent and long-term fiscal implications to the state General Fund of create a state Office of Oral Health and a state dental director position with private money.

Senator Padilla has announced his intention to reintroduce legislation in the special legislative session on health care reform, expected to be called by the governor in December, to pursue the issues contained in SB 694. CSPD leadership is committed to seeing that any future legislation fulfills the basic requirements outlined in our position statement and will closely examine this issue prior to making any decisions to support or oppose to any new legislation. We remain in support of the CDA Access to Care initiative and feel that the interests of our specialty are congruent with that of all of our dental colleagues.

Significant Approved Motions from the September 15, 2012 CSPD Board Meeting

- Moved to approve the September 15, 2012 agenda as presented.
- Moved to approve the June 9, 2012 CSPD Board of Directors meeting minutes as presented.
- Moved to approve the CSPD Business Cards.
- Moved to approve CSPD continue using Ben Franklin Press to print the Bulletin.
- Moved to approve rescinding the requirement for the CSPD Editor to be a member of AADE.
- Moved to approve the advertising guidelines for CSPD publications as presented.
- Moved to approve the 2012-2013 first quarter financial reports be accepted as presented.
- Moved that the preliminary cost analysis for the proposal to have AAPD perform annual dues collection for CSPD be conducted by the CSPD Finance Committee and forwarded it to the Board of Directors for review and possible further action.
- Moved to add that the Finance Committee provide a report about the dues collection process to the Board by March 2013 (after billing cycle ends) and can be presented at the 2013 Annual Meeting.
- Moved to move to table definitely CSPD's position on SB 694, as the point is moot.
- Moved to adjourn the meeting at 3:31 p.m.



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Public Policy Advocate's Report

2012 Legislative Wrap-Up

Paul Reggiardo, DDS, Public Policy Advocate



CSPD follows a number of bills under consideration by the State Legislature that potentially impact pediatric oral health. Updated information on the legislative progress of these initiatives may be found in the Advocacy, Legislation, and Regulatory Matters (ALARM) section of the CSPD website. Members having questions or wishing to comment on these or any other legislative matters are invited to contact CSPD's Public Policy Advocate Dr. Paul Reggiardo at reggiardo@prodigy.net.



advocacy
legislation
and
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matters

SB 694 (Padilla): Dental Access

This bill would have created a statewide Office of Oral Health within the Department of Public Health and headed by a state Dental Director, to develop and coordinate public programs effective in reducing barriers to dental access, including securing and managing federal and other grant programs to support oral health. The bill also called for the design and implementation of a rigorous scientific study conducted by a California dental school and under the patient protections of an institutional review board, to assess the safety, quality, cost-effectiveness, and patient-satisfaction of a defined set of dental procedures performed by registered dental hygienists and registered dental assistants in extended functions for children in public health settings under different levels of dentist supervision. The establishment of the Office and the scientific study would both have been dependent on the securement of federal and private funds.

CSPD Position: Support

Comment: *Ultimately, the bill failed passage by the Assembly Appropriations Committee because of concerns about the long-term funding of the office and the precedent of creating a state office and a state dental director position with private dollars. CSPD supported the bill. Senator Padilla, in a letter co-signed by Senator Bill Emmerson in September, confirmed his continued commitment to the objectives of SB 694 and announced his intention to introduce similar legislation in the Special Session on Healthcare Reform, expected to be called by the Governor in December.*

Last month, in a related development, the Washington State Dental Association (WSDA) House of Delegates voted to support legislation that would create a new Advanced Function Dental Auxiliary (AFDA) capable of providing procedures such as local anesthesia, cavity preparation, direct restorations in primary and permanent teeth, and pulpotomies in primary teeth amongst other duties. The WSDA had successfully blocked legislation in the past two sessions that would have created a dental therapist model operating outside of the dentist's diagnosis or supervision. The likelihood of continued blockage of such legislation was considered slim. In a letter announcing the House action, WSDA president, Dr. Danny Warner, wrote to membership "Leadership in the House and Senate has demanded that dentistry come forward with a proposal or they will pass their own legislation. By submitting a proposal, WSDA will ensure adequate supervision and safeguards to protect the public and profession." Supporters of an independent practice midlevel provider model are expected to introduce their own legislation in 2013. The WSDA legislation is expected to differ in creating a "physician assistant model" which has no diagnostic or prescriptive capability, is limited to Federally-Qualified Health Centers or other specified safety-net settings, must be under a dentist's direct or general supervision (depending on the duty) at no greater than a 1:2 dentist to AFDA ratio, must have prior dental hygiene or EFDA education and certification, and must meet specific training and examination requirements before being allowed to practice. The resolution by the WSDA House of Delegates concluded, "After two consecutive years with dental therapist legislation and growing support among legislators and advocacy groups, the odds of having some sort of dental midlevel provider established in Washington state have moved from possible to almost inevitable."

AB 1579 (Campos): Non-Contracting Dental Providers: Assignment of Benefits

This bill would have required dental plans to honor a signed assignment of benefits to the treating dentist, regardless of whether the treating dentist was a contracted or non-contracted provider under the plan.

CSPD Position: Support

Comment: *Opposed by the benefits industry, the bill came to be seen by the legislature as anti-consumer. By making it easier for a non-contracted provider to receive payment from a dental plan, the argument went, this bill would reduce incentives for dentists to join or maintain participation in a dental network.*

Outcome: Pulled from consideration after amendments requested in the Senate made it unsupportable by the bill's sponsor, CDA.

AB 2252 (Gordon): Dental Provider Contracts: Provider Notification of Changes

The bill requires dental plans to give at least a 45-day notice to contracted providers when there are any material changes to the plan's rules, guidelines, policies, procedures, terms, or conditions affecting the provider or payment for services. The bill also requires dental plans that automatically renew a provider contract to provide, upon request, an annual summary of the revised contract and any changes implemented during the preceding year.

CSPD Position: Support

Outcome: Passed by both houses and signed by the Governor in September.

SB 1186 (Steinberg): Disability Access: Liability

This bill prohibits plaintiff's attorneys from sending "demand for money letters" to a business prior to the filing of a formal construction-related claim for alleged violations of the Americans with Disabilities Act. Long viewed as "extortion letters" by small business owners, the bill requires that pre-litigation letters include details of the nature of the alleged violation(s) and allows for reduced penalties for the correction of relatively minor violations within 30 – 60 days, depending on the circumstances.

CSPD Position: None

Outcome: The bill was passed by the legislature and signed by the governor.

Continues on next page

Health Care Reform / California Health Benefit Exchange

With the upholding by the Supreme Court of the major provisions of the Affordable Care Act (ACA), California continues moving toward health care reform and development of the California Health Benefit Exchange.

Beginning in 2014 (and in 2017 for large employers), health plans must offer benefit packages to individuals and small employers inside and outside of the exchanges that include a designated range of services (including pediatric oral health care) and must meet certain other standards. Rather than establish a national standard for these benefits, the Department of Health and Human Services has directed states to choose one of a series of existing health plans to serve as the “benchmark” in each state. AB 1453 (Monning) and SB 951 (Hernandez) (Essential Health Benefits) set the Kaiser Small Group HMO plan as California’s benchmark for essential health benefits. Since the Kaiser plan does not include pediatric oral health benefits, the state must additionally select a supplemental pediatric oral health “benchmark” plan for children’s dental benefits. CSPD and CDA lobbied successfully for the inclusion of the Healthy Families Dental Program set of benefits as the pediatric oral health benchmark, with reference to the Federal Children’s Health Insurance Program Reauthorization Act of 2009 (CHRPRA) for medically-necessary orthodontic benefits. CSPD and CDA supported the adoption of the Healthy Families pediatric dental benefit package because this benchmark has a proven track record of meeting the oral health needs of California Children, is compliant with the comprehensive federal Medicaid Early Periodic Screening, Diagnosis and Treatment (EPSDT) requirements, and was designed as a stand-alone pediatric dental benefit program.

Much work continues to be done. The next step is to define how dental benefit plans will be presented in the California Exchange. While children’s dental benefit plans must be offered, the exchange may choose whether or not to offer adult benefit packages. CDA argues that offering optional adult benefits will allow the exchange to be a central location for comprehensive access to general and oral health benefits for both adults and children.

Equally important is whether children’s (and adult) dental benefits will be offered as stand-alone dental plans, integrated as part of comprehensive medical benefits plans, or both. Offering stand-alone dental plans reflects the current marketplace. There is virtually no existing model for integrated dental benefits. Health coverage that includes dental benefits generally offers those benefits through a separate dental plan.

Healthy Families Program Shift

In July, the Governor’s proposal to move the 875,000 children enrolled in Healthy Families (California’s Children Health Insurance

Program) to Medi-Cal delivery was approved by the legislature and signed into law. When it was originally announced in January, the Governor’s budget proposal would have resulted in a statewide transition of all Healthy Families enrollees into dental managed care. Because of opposition by Senate President Pro Tem, Darrel Steinberg, skepticism brought to the attention of the legislature by a series of articles in the Sacramento Bee exposing deficiencies in the Sacramento Geographic Managed Care (GMC) program, and a concerted effort by CDA, this was averted. Language in the budget trailer bill directed that all Healthy Family enrollees would move into the Denti-Cal fee-for-service program except Sacramento County, where dental managed care is already mandatory, and Los Angeles County, where dental managed care is optional at the discretion of the parent. The transition will occur in four quarterly phases beginning in January, 2013.

The trailer bill includes provisions requiring a detailed implementation plan by the Department of Health Care Services (DHCS) for each transition phase to ensure continuity of care and network adequacy for enrollees, accountability measures currently in the HFP that will be applied to the Medi-Cal program, and many of the plan oversight responsibilities being concurrently developed by the DHCS at the direction of the legislature to address deficiencies in the Sacramento GMC program. Also included is specific language demanding an open stakeholder process in Sacramento and Los Angeles that allows provider and consumer input into the development of a comprehensive strategic implementation plan.

Sacramento Geographic Managed Care

As a result of a concerted effort by the Sacramento Dental Society and Sacramento First Five Commission and a series of articles in the Sacramento Bee exposing the dismal encounter data, lack of access to providers, and paucity of dental services delivered under GMC in comparison to the Denti-Cal fee-for-service program, Senate President Pro Tem Darrell Steinberg introduced specific GMC reform legislative language earlier this year as part of the state budget process. While the administration has made clear it will not abandon mandatory Denti-Cal managed care delivery in Sacramento, budget trailer bill language signed by the Governor provides for specific accountability measures and requires DHCS oversight of plans performance. In addition, the legislation creates a Beneficiary Dental Exception process which will, for the first time, allow families to opt out of the Sacramento dental managed care system if they cannot access an appointment with a plan provider in a timely fashion after assistance by the DHCS.

Public Policy: Strategic Health Initiatives for the Children’s Partnership

The following is a letter from Jenny Kattlove, Director for Strategic Health Initiatives for the Children’s Partnership, to Paul Reggiardo, CSPD’s Public Policy Advocate:

Dear Paul,

Thank you for the kind words and expression of continued commitment. I want to take this moment to tell you how much I have enjoyed working with you and the rest CSPD on this. I also want to thank you for the tireless work you have put into moving SB 694 forward. You, Dr. Stewart, and the rest of CSPD’s leadership and membership have not only been very proactive, you have had to endure and respond to opposition. And you did so honestly and gracefully. Your commitment to the cause is commendable, and I know it is because of your commitment to children.

While the end of last week was very disappointing, we at The Children’s Partnership have renewed hope that we can achieve our goals through a continued partnership with CSPD and CDA.



Paul Reggiardo, DDS, Public Policy Advocate

The Dental Board of California met August 16-17, 2012, in Sacramento. The following summarizes actions and issues coming before the Board pertinent to pediatric oral health. CSPD is represented at each meeting of the Dental Board and updated reports are posted in the Advocacy, Legislation and Regulatory Matters (ALARM) section of the CSPD Website. Members having questions or comments should contact CSPD's Public Policy Advocate, Dr. Paul Reggiardo, at reggiardo@prodigy.net.

Enforcement Program Statistics

The Enforcement Division of the Dental Board reports regularly on Complaint Intake and Investigation statistics. For the previous twelve months, 3,507 complaints were received. If past performance statistics are used as a guide, approximately 60% of the cases will ultimately be dismissed for insufficient evidence, 20% will be discharged with the conclusion that no violation of the Dental Practice Act or Business and Professions Code occurred, and slightly less than 20% will result in referral for administrative or criminal action. Approximately two-thirds of the complaints will allege clinical incompetence/negligence.

Comment: *Cases are typically closed for insufficient evidence when a complaint alleging negligent or incompetent treatment is reviewed by a Subject Matter Expert appointed by the Board and found to be a simple departure from the normal standard of care or does not rise to the level warranting formal discipline.*

RDA Written Examination

The Examination Committee continues to find the pass rate for the Registered Dental Assistant (RDA) written examinations to be unacceptably low, in spite of the introduction of a revised exam in March. For the first half of this year, the overall pass rate for the RDA written examination was 58% and the RDA law & ethics examination was an even lower 54%. Among repeat candidates, the pass rate is even poorer. Wanting to improve the test result without compromising the integrity of the examination process, the Examination Committee and the Board's Dental Assisting Council jointly recommended to the Board that staff be directed to investigate those factors that might be contributing to the low passing scores. The Board subsequently accepted this recommendation.

Comment: *The Board has not collected data that would enable it to differentiate the pass/fail rate for candidates with formal schooling from those with on-the-job training. Likewise, there is no information*

on the English fluency of RDA applicants or on the relevance of purchase materials and prep courses commercially available to candidates. These are the types of issues the Committee wishes to examine.

Licensing Fee Increase

Citing a shortfall in projected revenues in relation to expenses, the Board acted to start the formal regulatory process that would increase licensure fees by an aggregate 23%. Under the proposed scenario, the dental biannual license renewal fee would increase from \$365 to \$450 and other examination, licensing and permitting fees would experience a similar increase. These fees were last increased in 1998.

Comment: *Examination, licensure, and permit programs are generally supported by their own fees. License renewals are predominately used to support the Board's enforcement programs and administrative overhead costs.*

Mobile Facilities Regulation

In May, acting on a request from the California Dental Association, the Board agreed to examine the regulations pertaining to mobile dental providers and facilities. CDA contends current regulations lack appropriate measures to ensure accountability and public safety. A subcommittee appointed by the Board and working with the Board's legal counsel, found the regulatory changes proposed by CDA (see May, 2012 Dental Board Report) are not authorized by statute and would not meet the necessity and clarity standards of the Administrative Procedure Act (APA).

Comment: *As such, the regulations would not gain approval from the Office of Administrative Law (OAL). Any meaningful changes in mobile facilities regulation will probably require a combination of future statutory and regulatory change.*

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- Basic Principles of Pharmacology and Sedation Pharmacology
- Special Patient Care Dentistry
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Speaker and Educational Session Information 2013 CSPD/WSPD Annual Meeting

April 25 - 28, 2013

Rancho Las Palmas Resort & Spa
Rancho Mirage, CA



Thursday, April 25, 2013

CSPD Foundation Sponsored Course

The Affordable Healthcare Act – Its Effect on Pediatric Dental Practice

- Speakers To Be Determined

Course Objective: This course will have a panel of experts that will discuss how the Affordable Healthcare Act of 2014 will affect patient care and the business of dentistry. More detailed information will be forthcoming as the course is finalized. Look for more information on the CSPD website, in the CSPD Bulletin, and in e-blasts.

Friday, April 26, 2013

Understanding Legal Tools: The Key to Lawsuit Prevention and Tax Reduction



Dan McNeff received his B.S. from Brigham Young University and his CFP from UC San Diego. He is the CEO of Legally Mine. In addition to running his own businesses for the last 20 years, he has served as the Senior Vice President of one of the nation's largest financial services company for 15 years. He is a published author with one book and many magazine and newspaper articles. He

has been married for 31 years and is the father of 8 children and grandfather to nine children. Mr. McNeff has conducted hundreds of seminars and is responsible for helping thousands of people protect their assets and reduce their tax liabilities.

Course Objective: The presentation will discuss the proper structuring of dental professionals legal entities (Living Trusts, Family Limited Partnerships, C and S Corporations, and LLCs) to accomplish the following:

- Understanding of correct legal deductions of each entity and correct partnership structuring for lawsuit prevention and tax reduction.
- Structuring their practice for maximum tax reduction and malpractice protection and prevention.
- Maintain the focus of their dental practice on improved patient care rather than malpractice defense.
- Ensure 100% protection of their personal and professional assets from lawsuits through applied risk management.
- Reduce malpractice insurance costs and taxes.
- Keep focus on patients (no legal defense, taxes, etc.) to keep dental practice costs down.

Friday, April 26, 2013

Simple Tips to Start a Sedation Practice



Dr. David Rothman received his B.A. Cum Laude from the State University of New York at Buffalo and his dental degree from the New York University College of Dentistry. Following a General Practice Residency at Albert Einstein Medical Center and an Anesthesiology Residency at the Medical College of Pennsylvania, he completed his Pediatric Dental Residency at Children's

Hospital in Oakland and the University of California, San Francisco. After being Pediatric Dentistry Residency Program Director at UCSF, he became Chair of Pediatric Dentistry at the University of the Pacific School of Dentistry and currently is an Associate Professor of Pediatric Dentistry in the School of Dental Medicine of Case Western Reserve University. Dr. Rothman is Board Certified as a Diplomate of the American Board of Pediatric Dentistry. He is an active member of the American Academy of Pediatric Dentistry, California Society of Pediatric Dentists, American Dental Association, and the California Dental Association. He is on the active staff of the California Pacific Medical Center, Kaiser Permanente Medical Center/San Francisco and Children's Hospital in Oakland, and he consults on the Craniofacial Panel of Kaiser Permanente Medical Center. He lectures nationally and internationally in the areas of anesthesia, sedation and pediatric dentistry. He has three children and lives in San Francisco.

Course Objective: You've finished your residency, you were exposed to a few sedations (most were "screamathons"), and now what do you do? This course will provide the basics of how to set up your practice, get the right permits (yes, there are more than one), develop a quality assurance plan, purchase and maintain the right equipment and drugs, create the paperwork you will need, train your staff, and prepare for emergencies (yes, that is possible!).

2013 CSPD/WSPD Annual Meeting Continued

Friday, April 26, 2013

A Pediatric Dentist Guide to Orofacial Myology



Kirk and Katherine Bowman, Anaheim Hills Speech and Language Center

Katherine Bowman M.S.,CCC is a licensed speech-language pathologist and is founder/director of Anaheim Hills Speech and Language Center. She is also an Adjunct Professor in the Speech Pathology Graduate Program at Chapman University in Orange. She graduated from California State University Long Beach receiving her B.A. in Communicative Disorders and Chapman University receiving her M.S. in Communicative Disorders. She is an active member of the International Association of Orofacial Myology, the American Speech and Language Association and is on the Advisory Board for the California Speech and Language Association.

Kirk Bowman received his Bachelor's Degree from California State University Long Beach. Post Graduate Education included courses in: Communicative Disorders, Child Development, Psychology, Dental Hygiene, Neurology, Anatomy, and Physiology. He is an active member of the International Association of Orofacial Myology

Course Objective: Participants will learn about Orofacial Myofunctional Disorders (OMD) and their effects on dentition; what is state-of-the-art in OMD; how to identify OMD; and when and why to refer. Additionally, they will learn how Orofacial Myofunctional Therapy (OMT) differs from Dental Treatment and what the future holds for the field of OMT.

Embezzlement: Simple Strategies to Avoid Theft in Your Dental Practice



Ali Oromchian, J.D., LL.M., Dental and Medical Counsel, P.C.

Mr. Oromchian is one of the nation's leading legal authorities on topics relevant to dentists. Since its creation, the Dental and Medical Counsel PC law firm has been regarded as one of the pre-eminent health care law firms devoted exclusively to health care professionals with offices in San Ramon, Reno, Honolulu, and Irvine. His clients seek his advice on practice acquisitions and sales, creation of corporations and partnerships, associate contracts, estate planning, employment law matters, office leasing and state board defense. He is a frequent speaker on topics such as employment law, negotiations strategies, contract and estate planning throughout North America. Using humor, real world examples, and his business experience, he communicates legal concepts with a unique, conversational style that is neither tedious nor too "lawyerly."

Course Objective: The focus of this seminar is to analyze and examine the methods used by employees, patients, and associates to steal from the practice owner. You will learn how to recognize danger signs that point to embezzlement, decide what steps to take when embezzlement is occurring, and learn easy techniques that will reduce your susceptibility to embezzlement.

Saturday, April 27, 2013

What To Expect When You're Sedating: Basics of Sedation for the Advanced Practitioner

David Rothman, DDS

Course Objective: This course will review the basics for a practitioner who has advanced experience in sedation. These are the areas that will be covered:

- Pediatric physiology: why children are different than adults
- Pediatric pharmacology: how and why drugs work and what happens to them
- Inhalation therapy: nitrous oxide/oxygen analgesia and why it's a nearly perfect drug for sedations
- Medications for oral and IV sedation: how to choose the "best" drug or drugs based on their length and severity
- Monitoring: what are you looking for anyway?

A Review of Medical and Dental Emergencies: How to Recognize, Treat and Prevent Them



Dr. Joseph Renzi, Jr., M.A., D.D.S, a native Southern Californian, is a Board Certified pediatric dentist that has primarily been in clinical practice for over thirty years. He is a senior evaluator for the on-site examination required of conscious sedation permit holders in the State of California. Practicing comprehensive pediatric dentistry has been his top priority for his practice career. He

maintains staff privileges in three major hospitals in Orange County, CA and has assisted the Anesthesia Department in writing conscious sedation guidelines for one of Orange County's trauma centers.

Dr. Renzi has been active in organized dentistry, local school district, and legislative activities. His many interests include collecting unique automobiles and real estate development. He also maintains a part-time faculty appointment in the Department of Pediatric Dentistry at Ostrow School of Dentistry (USC).

Course Objective: Dr. Renzi will review the equipment, drugs, and physical office requirements for undertaking sedation in a dental office. Included in this presentation will be mock cases that will demonstrate common medical and dental emergencies that occur in the dental office. Additionally, there will be a review of mishaps that have led to emergency situations and advice on how to prevent those accidents from occurring.

2013 CSPD/WSPD Annual Meeting continued

Saturday, April 27, 2013

Infection Control



Leslie Canham, CDA, RDA

Leslie Canham is an international speaker with over 40 years of experience in dentistry. Her fast paced and entertaining programs are favorites of dental societies, study clubs, and associations. Leslie is the founder of Leslie Canham & Associates providing In-Office Training, Consulting Mock-Inspections,

Home-study courses, teleconferences, and webinars. She is authorized by the Dental Board of California to provide continuing education for licensees and teaches an 8 Hour Infection Control course for unlicensed dental assistants. She is authorized by the Department of Labor as an OSHA Outreach Trainer in General Industry Standards.

Course Objective: The participant will learn how to update their existing infection control practices to meet current California Regulations and CDC Guidelines. Examples of infection control "Do's and Don'ts" and "hands on" demonstrations will provide the participant with valuable tips. This program will motivate each participant to strive for infection control excellence in pediatric dentistry.

Sunday, April 28, 2013

Insurance Coding Workshop



Mary Essling, Dental Benefits Manager,
American Academy of Pediatric Dentistry

Ms. Mary Essling is the Dental Benefits Manager at the American Academy of Pediatric Dentistry, a position which she has held for over five years. Prior to that, she was the Manager of Third Party and Reimbursement Issues for the American Society of Plastic

Surgeons and the Administrator of the CDT codes for the American Dental Association for 10 years. Ms. Essling holds a B.S. in Dental Hygiene from Marquette University and a Masters in Health Law Administration from DePaul University. She lives in Chicago.

Course Objective: CDT Codes are revised annual which impacts practice administration in terms of submitting correct codes to third party payers. This workshop will explain the code revision process and delineate the changes that affect the dental practice. Ms. Essling will also cover general coding issues plus specific ones that may be unique to your region. She will present information on claims processing tips, coordination of benefits, documentation requirements specific to pediatric dentistry, cross coding dental procedures to medical procedure and diagnosis codes, tips on developing meaningful narratives, Medicaid policies on reimbursement issues, and tips for appealing claim denials.

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Western Society of Pediatric Dentistry

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38th Annual Meeting...April 25-28, 2013

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*To ensure your company is listed in the
conference program, forms must be sub-
mitted no later than Thursday, February 28, 2013.*

CSPD
Attn. Simone Parker, CMP
1215 K Street, Suite 940
Sacramento, CA 95814

CDA Cares Sacramento

On August 24-25, 2012, CDA and the CDA Foundation held a two-day free clinic in Sacramento where 2,026 patients were treated. There were 10,888 procedures performed for a total of \$1.655 million in donated services. Andy Soderstrom, Past President of CDA and CSPD, chaired the event. Along with the 1,153 people who volunteered for the event were 11 CSPD members: Chris Claus, LaJuan Hall, Jeff Huston, Chester Hsu, Paul Johnson, Dennis Nutter, Lindsey Robinson, Andy Soderstrom, Joann Toy, Randall Wiley, and Jessica Wilson.

Two similar events are being planned for 2013. Dates and locations have not been finalized but they are likely to be in the South Bay in Northern California and in the San Diego area in Southern California.



Dr. Andy Soderstrom and a happy patient!



Dr. LaJuan Hall examines a patient.

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a non-dentist from furnishing certain business and management services in operating a dental practice. Many states have restrictions on the use of trade names, such as “Smiling Dentistry,” for a dental practice. They require the name of individual dentist(s) to appear prominently in the name of the practice.

In states where non-dentist ownership is permissible, that is often conditional on non-interference with the professional judgment of a dentist. According to the ADA⁸, twenty-two (22) states, including California, prohibit non-dentists from interfering with the professional judgment of a dentist.

The state legal and regulatory situation is similar for medical practices. Some states prohibit “corporate medicine,” while others allow it subject to certain conditions -- the most important being that the corporation does not exercise control over physicians’s independent medical judgment.⁹

Management Service Organizations

Challenging issues have been raised with the advent of dental management service organizations or MSOs. JADA first published an article¹⁰ about this trend in 1997 indicating that, while such organizations may free dentists to concentrate on dentistry, they also raise certain legal and professional questions. An MSO can be defined as follows:

“In general, a dental MSO provides management services that support the dental services provided by a dentist or his or her group practice. An MSO may provide a wide range of services- billing and collections, scheduling and record management, negotiating with insurers, recruiting staff, leasing space, purchasing equipment, credentialing, utilization review and quality assurance review.”¹¹

Two basic structural models were noted:

“An MSO may provide comprehensive management services for a dental practice in exchange for a fee. Or it may actually buy the dental practice from the dentist and employ the dentist either directly or indirectly through an affiliated entity such as a professional corporation.”¹²

State laws might prohibit “corporate dentistry” while making an exception for MSOs. For example, in Illinois there is a general prohibition on corporations practicing dentistry, with an exception for MSOs providing non-clinical business services.¹³

A well-known MSO in California and other western states is Pacific Dental Services (www.pacificdentalservices.com) which describes their business model as taking care of operational needs to free the dentist from the complex business details. A dentist may start out as associate and eventually obtain ownership stakes. This MSO promotes the benefits of a dentist having a better lifestyle, higher earnings, and more time for clinical care.

Case law to date does not provide any hard and fast rule as to the extent that an MSO can be involved in clinical operations and decision-making without violating a dental practice act.¹⁴ Hence, the issue as to what point does a MSO cross the line from providing non-clinical business services (allowable) to providing clinical services (which may constitute the unauthorized practice of dentistry) or improperly interfering with the professional judgment of a dentist is likely to be the subject of continued legal disputes.

Private Equity Ownership

The issue of whether private corporate investors in dental practices have a negative impact on quality of care has generated recent media coverage.¹⁵ Several corporate chains have sprung up in the past decade with a focus on treating children on Medicaid. Senator Charles Grassley (R-Iowa) claims his investigators have found examples of overtreatment. For example, dentists are allegedly being pressured to use higher reimbursed crowns versus less expensive fillings. One of the chains in question vigorously denies such claims and asserts they are appropriately adhering to AAPD’s clinical guidelines on restorative dentistry.

It is recognized that dentists operating private practices also have to break even or turn a profit or else their practice will fail. However, dentists are licensed health care providers who have legal, ethical, and professional duties of care that are closely regulated by the state. Do these same constraints apply to non-dentist investors, be they corporate or individual, who simply want a high return on investment and in doing so may request or demand clinical decisions that are not in the best interest of the patient?

Appropriate State Dental Board Regulation?

This issue does raise some interesting federalism concerns, since the criteria for incorporation and regulation of a corporate entity are usually a state law matter. Of course, any practitioner or practice can be barred from Medicaid or other federally funded programs based on fraud. However, in terms of regulating the appropriate practice of dentistry, it would appear more sensible to defer corporate ownership of dental practice issues to regulation by state boards of dentistry; provided that if state dental boards are to regulate reasonably, they must be assured they are not going to face a federal antitrust investigation.

Recent examples from two states illustrate possible approaches and challenges.

This past summer, the North Carolina legislature passed Senate Bill 655 - Dentistry Management Arrangements, which was a compromise between the North Carolina Dental Society and the Alliance for Access to Dental Care (the umbrella organization for dental management corporations). The law will require the State Board of Dental Examiners to adopt rules providing greater regulatory oversight of the contracts that dentists reach with the management companies. The measure will clarify existing dental law and attempt to reduce litigation against the state board, which currently reviews the management contracts that dentists are entering. The law will require such contracts to include warnings encouraging dentists to get legal advice before signing them. The final bill left out details on exactly how such contracts would be scrutinized instead leaving it to a six-member task force that will include two people connected to dental management corporations. The dental examiner will receive the task force recommendations in January, 2013, but doesn’t have to follow the task force’s suggestions.

The Arizona legislature recently amended its dental practice act to require all business entities providing dental services in the state to register with the dental board.¹⁶ These business entities may not “establish or enforce a business policy or practice that may interfere with the professional judgment of the licensee in providing dental services for the entity or may compromise a licensee’s ability to comply with this chapter.” A licensed dentist may not be employed by an unregistered business entity. The board may take action against any entity for acts of unethical conduct.¹⁷

Conclusion

It might be argued that the corporate structure of any dental service delivery organization is not a matter of concern so long as dentists in such organizations practice within ethical and professional parameters. Conversely, it might be argued that the impact of non-dentist involvement in decision-making is so inherently detrimental that, however structured, inevitably profits will prevail over ethical and appropriate clinical decisions. As noted, these issues are not unique to dentistry, as corporate medicine laws demonstrate. There are certainly many unanswered questions and conflicting forces at work, which will be put to the test as the environment of health care reform may lead to greater concentration of health care clinical ownership. That, ironically, may not necessarily bring about the efficiency and quality that health care reform advocates envision. Advocates for children’s oral health certainly can insist that all dental clinical operations be held to one high standard of care through appropriate regulatory oversight by state boards of dentistry.

(Continues on next page)

(Endnotes)

¹ The views expressed in this article are solely those of the author, not necessarily those of the American Academy of Pediatric Dentistry.

² American Dental Association, Survey Centers, Surveys of Dental Practice.

³ Ibid. Note that current collaborative survey efforts between ADA and the AAPD Research and Policy Center will provide additional details on practice pattern trends in pediatric dentistry.

⁴ A number of states include a legislative exception to enable a spouse or personal representative of a deceased or disabled dentist to continue the operation of a dental practice for a specific period of time.

⁵ American Dental Association, Department of State Government Affairs, #22 Ownership-Interference, September 18, 2012.

⁶ California Business and Professions Code Section 1805 concerning dental corporations provides that "Except as provided in Sections 13401.5 and 13403 of the Corporations Code, each director, shareholder, and officer of a dental corporation shall be a licensed person as defined in the Moscone-Knox Professional Corporation Act. However, the aforementioned section of the Corporations Code provides that:
 "... the following licensed persons may be shareholders, officers, directors, or professional employees of the professional corporations designated in this section so long as the sum of all shares owned by those licensed persons does not exceed 49 percent of the total number of shares of the professional corporations so designated herein, and so long as the number of those licensed persons owning shares in the professional corporation so designated herein does not exceed the number of persons licensed by the governmental agency

regulating the designated professional corporation: . . .

- (n) Dental corporation.
 - (1) Licensed physicians and surgeons.
 - (2) Dental assistants.
 - (3) Registered dental assistants.
 - (4) Registered dental assistants in extended functions.
 - (5) Registered dental hygienists.
 - (6) Registered dental hygienists in extended functions.
 - (7) Registered dental hygienists in alternative practice."
- ⁷ American Dental Association, Department of State Government Affairs, #22 Ownership-Interference, September 18, 2012.
- ⁸ Ibid.
- ⁹ Corporate Practice of Medicine Doctrine 50 State Survey Summary. Document prepared in September 2006 by the Hospice and Palliative Care Practice Group of Reinhart Boerner Van Deuren s.c. with funding from the National Hospice and Palliative Care Organization (NHPCO) and the Center to Advance Palliative Care (CAPC).
- ¹⁰ Sfikas PM. Who's minding the store? J Am Dent Assoc 1997;128;1462-1465.
- ¹¹ Ibid.
- ¹² Ibid.
- ¹³ 225 ILCS 25/44 from Ch. 111, par. 2344 (Source: P.A. 96-328, eff. 8-11-09.)
- ¹⁴ Sfikas PM. Court rulings differ on legality of dental MSO agreement. J Am Dent Assoc 2005;136;678-680.
- ¹⁵ See <http://www.bloomberg.com/news/2012-05-17/dental-abuse-seen-driven-by-private-equity-investments.html>
- ¹⁶ Arizona Revised Statutes, Section 32-1213.
- ¹⁷ Arizona Revised Statutes, Section 32-1263. D.

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Continuing Education

It's Time to Think About Online (Continuing Education, that is!)



Karilyn House, DDS

As other parts of this bulletin will cover our upcoming 2013 Annual Meeting Continuing Education topics, I wanted to highlight Online Continuing Education (OCE). OCE can be a great resource if you need high quality CE programs, but aren't able to participate in live courses. OCE courses can work well if you are coming down to the wire on your license renewal and need some additional CE units. The OCE courses can also help limit our time out of the office and can help avoid travel and lodging costs.

Lonnie Lovingier, Roland Hansen, and Steve Niethamer (the big guns of the CSPD OCE committee) wanted to include a few comments for our membership. Because of the restructuring of our organization, OCE is now considered to be a subcommittee of the Membership committee. However, in this article, the word "subcommittee" and "committee" both refer to the same group of individuals. Here are their thoughts:

"We are excited with anticipation for the completion of the new Online Continuing Education Website. As with all technology, the platform and formats of our online lectures had become outdated. CSPD had been informed by our hosting company that we would have to undergo extensive updates and revisions. The original company has changed ownership three times in previous years and that fact has concerned the OCE committee.

Our Online Continuing Education subcommittee believed that this was a good time to investigate, interview, and evaluate competitive companies providing the same services. The committee spent an enormous number of hours, weeks, and months researching various companies before making a decision. CSPD has signed a development contract with Windrose Media to carry OCE into the future.

The online education software developed and hosted by Windrose Media will allow CSPD's OCE to play a much larger role in the day to day editing and updating of information on the site. It will allow CSPD's OCE to host both paid and unpaid lectures for CE credit. The separate library for the IAPD members will still be hosted. The new program will allow CSPD's OCE to load simple video clips in an instant and provide our members video for hot topics which might be time sensitive. We are hoping this new site will be up and available soon.

Please excuse any inconveniences which might be caused by this changeover.

Please visit the CSPD website periodically to look at our online CE course offerings. Our OCE committee is always hard at work and the committee members spend more time than you can even imagine developing the courses so that they are ADA CERP compliant.

If you are a time-based Diplomate of the American Board of Pediatric Dentistry, you are required to take the Comprehensive Review of Pediatric Dentistry Course given by the AAPD. This course can now be taken digitally. If you and another Diplomate need to take the course, there is a package that can be purchased at a greatly reduced cost for the additional Diplomate/Diplomates. You will share the main set of audio and/or video disks, but each additional Diplomate will get his/her own CD-ROM syllabus and CDE information. You can find our more information here: [www.cmeinfo.com/store/temp/AAPD Comprehensive Review of Pediatric Dentistry_470.asp](http://www.cmeinfo.com/store/temp/AAPD%20Comprehensive%20Review%20of%20Pediatric%20Dentistry_470.asp).

Happy Learning!

Healthy Smiles Check Presentation



Left to right in the photograph: David Okawachi, DDS, Richard Mungo, DDS, Congresswoman Loretta Sanchez, Santos Cortez, DDS, John Guijon, DDS

Congresswoman Loretta Sanchez was recently presented a check for her campaign by Santos Cortez, DDS on behalf of the American Academy of Pediatric Dentistry (AAPD) Political Action Committee at the Healthy Smiles For Kids of Orange County Smile Center in Garden Grove, California. The Congresswoman has been a long time supporter of pediatric oral health in Orange County and she shared with the group her personal story and connection to the need for pediatric dental care in the area.

The Smile Center is a 7,000 square foot pediatric dental facility that provides underserved children ages 0-17 with specialty dental care that ranges from twice-a-year check-ups to sedation services. In partnership with the University of Southern California's Ostrow School of Dentistry, Healthy Smiles has a pediatric dentistry residency program which helps increase access to oral health for children. Healthy Smiles current residents are Brandon Gire and Geraldine Hidalgo.

Healthy Smiles is truly honored to have had the opportunity to participate in the check presentation to the Congresswoman at the Smile Center.



Foundation President's Message

A Season of Decisions

Steve Gross, DDS

I hope you all had a wonderful and busy summer! Now is the season for settling into our fall routine of school, work, and looking forward to the winter season with the upcoming holidays and a new year.

Now is the season of important of decisions one of which is "who will be the recipients of my charitable contributions?" Through your generous donations, this Foundation has continued funding the Bridge the Gap program which has been an overwhelming success. We sponsor controversial forums that address key issues which affect you both personally and professionally. Additionally, we continue to fund one to two Warren Brandli Interns each year.

Your contributions help the Foundation increase the visibility of our specialty and the importance of children's oral health. A larger audience for our Foundation means that your donations and corporate sponsorship dollars go further and provide more return on investment.

Goals and Assurances

- Will act as a trusted steward of your charitable contributions and will use them effectively to support the meaningful programs that improve the overall education of our future pediatric dentists.
- Supports science-based research in dentistry.
- Advocates life-long learning, research grants, and other initiatives that promote and sustain excellence in dental education.
- Believes that good oral health improves children's overall health and quality of life.
- Seek partnerships to generate and leverage resources.
- Actively solicits the dental community and general public to support pediatric dental research and education.

We will increase knowledge of and access to children's oral health care by promoting our mission to support the six pediatric dentistry residency programs in California.

Planning for the Future

A strategic planning session will take place in January, 2013 to reexamine our goal to raise our profile among the membership, general public, corporations, and foundations. We hope this leads to a broader base of support which will result in increased funding to serve the programs in California.

Our Commitment to Optimal Oral Health for All Children in California

- Our Commitment to support of education.
- Our Commitment to scientific research and evidence-based pediatric dentistry.
- Our Commitment to our donors and friends whom we invite to join us on this exciting road to a bright future.

To donate go to www.cspd.org/foundation. As always I welcome your comments and suggestions and can be reached at steve@appliancetherapy.com. Thank you for your support and partnership.

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Lori Good	Janelle Holden	Fariborz Rodef	Duane Spencer	

Contributing

Carla Abboud	Estella Liou	Lindsey Robinson	Eddie So	Cynthia Weideman
Urmi Amin	Leticia Mendoza-Sobel	Donald & Paula Schmitt	Jeffrey Sue	Michael Weideman
Jonathan Gidan	Judith Pabst	Justin Shuffer	Wayne Tofukuji	Hila Robins

Member

Howard Brostoff	Weyland Lum	Gus Petris	Sumalee Sangsurasak	A. Jeffrey Wood
Eduardo Correa	Steve Mascagno	Robert Ripley	Kaoknuch Shiflett	Kanoknuch Shiflett
Geoffrey Groat	Claudia Masouredis	Robert Ruby	Richard Udin	
Vivian Lopez			George Wilson	

Other

Alexander Alcaraz	Janice Gerber	Victoria Sullivan	Patricia Turley	Ann Tornabene-Barnes
Charles Bona	Jamie Sahouria	Ann Tornabene	Charles Udolph	

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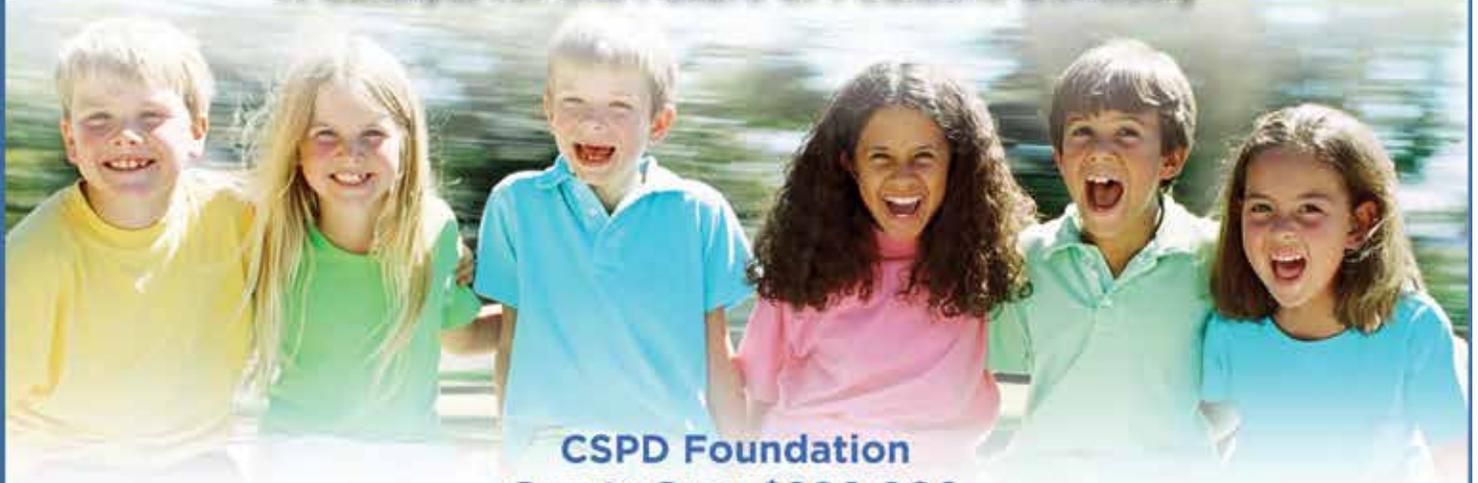
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Changing of the Guard



As you may already know, Dr. Ray Stewart has stepped down as Executive Director of the CSPD Foundation. Ray has been a leader, mentor, and contributor to the profession of pediatric dentistry. He is always on the forefront of key issues that involve access to care for children and has supported the Foundation's mission of addressing the educational crises happening all across the country. His leadership skills, ability, and knowledge of our organization have carried the Foundation through these tough economic times. Dr. Stewart has agreed to stay on as an advisor and assist the Foundation through this transitional period including our upcoming strategic planning session. The Foundation would like to thank Ray for all he has done and for all he will do to facilitate the Foundation's growth in the future.



New Beginnings and Welcome

I would like to welcome Deborah Johnson as the Foundation's new Executive Secretary. Deborah is more than qualified to lead and organize the Foundation. She is a high performance senior leader with over 10 years of experience managing non-profit organizations and possesses the ability to change and improve organizational performance and management. She is a self-directed professional that takes pride in transforming a vision into reality while building a sustainable foundation for continued success.

Qualifications

- EXECUTIVE DIRECTOR CONSULTANT June 2009 – Present
- Executive Assistant to Dr. Ray Stewart, Executive Director of CSPD and CSPDF
- EXECUTIVE DIRECTOR
- Western Society of Periodontology - Lakewood, CA 2000 to the present
- EXECUTIVE DIRECTOR
- San Gabriel Valley Foundation for Dental Health, CA 1994 – 2002
- EXECUTIVE DIRECTOR
- San Gabriel Valley Dental Society, San Gabriel, CA 1991 – 2000
- Professional Affiliation:
- American Society of Association Executives 1991 to the present



New contact information:

CSPD Foundation
Deborah Johnson Ex Secretary
P.O. Box 1065 Wildomar, CA
92595
cspdfdeb@gmail.com
Fax 805-496-5953

Faculty Spotlight

By Justin Shuffer, DDS

Five Questions with Dr. Gardner Beale



Dr. Gardner Beale received his undergraduate degree from USC in 1972 and his D.D.S. from the USC School of Dentistry in 1976. From 1976-1977, Dr. Beale worked at the Watts Health Center with Drs. Lou Daniels, Al Faison, and Richard Berman. His desire to learn more lead him to pursue his specialty training from 1977-1979 at the King Drew Medical School/Martin Luther King hospital/UCLA pediatric dentistry residency program with Drs. Ron Johnson and Thomas Barber. From 1979-1981, Dr. Beale was the Head of Pediatric dental faculty at Hubert H. Humphrey comprehensive Medical Center. From 1982-1984, he served as the dental director of the California hospital, and from 1997-2003, Dr. Beale served as the Pediatric Dental Director of The Children's Dental Center in Inglewood, California. Since 1997 to present day, Dr. Beale is proud to serve as a Clinical Associate Professor at the University of Southern California, while maintaining his private practice in Westchester, CA since 1980. The CSPD Foundation would like to thank Dr. Beale for his dedication to our specialty and for training our future leaders, teachers, researchers, and practitioners of pediatric dentistry.



Q: What made you decide to teach future pediatric dentists?

A: One day in my office, I realized that I only had a few thousand charts in the office and I wanted to help more children. I realized that I may be able to reach more children by training doctors with similar philosophies as myself who could go out and see more children. I also wanted to share all the information and knowledge that I had gained over the course of my career.

Q: What is the most rewarding aspect of teaching?

A: The most rewarding aspect of teaching is to see the students you have helped come back and become faculty themselves. It is great to see the growth they have attained.

Q: What did you find to be the toughest challenge to face your first year out of residency and is it different than what new graduates have to face today?

A: The toughest thing after graduation for me was starting a private practice as soon as possible. I feel that new doctors now want to work and learn with someone first before they start their own practice.

Q: Do you find that teaching improves your skills in private practice?

A: Teaching forces you be more informed about dentistry. When teaching, you are required to keep up with the literature and most up to date techniques and materials. This knowledge will also improve your skills in private practice. In order to teach, you must really know your subject matter.

Q: What are your absolute favorite patients to treat and, outside of pediatric dentistry, what are your absolute favorite things to do in life?

A: My favorite patients are the challenging ones. They allow me to utilize all of the techniques and skills that I have learned to help the patients. I always get to know more about my challenging patients and establish lasting relationship with them. My favorite activities are golfing, fishing and traveling.

Annual Giving Campaign 2012 - 2013

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All donors receive the following benefits:

- Recognition in the CSPD Foundation's Annual List of Contributors published in the CSPD Bulletin and Annual Meeting program.
- Recognition in the CSPD Foundation's Annual List of Contributors published in the Giving Campaign annual brochure.
- Badges showing membership level to be worn during the CSPD Annual Meeting.
- Recognition in the CSPD Foundation's Annual List of Contributors displayed prominently at the CSPD Annual Meeting.

President's Circle donors receive the following additional benefits:

- Special designation in the Annual List of Contributors in the CSPD Bulletin and at the CSPD Annual Meeting
- Personal Annual Briefing by Foundation Trustees
- Invitation to the President's Circle reception at the CSPD Annual Meeting

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- Recognition in the CSPD Foundation's Annual List of Contributors published in the Giving Campaign annual brochure.
- Badges showing membership level to be worn during the CSPD Annual Meeting.
- Recognition in the CSPD Foundation's Annual List of Contributors displayed prominently at the CSPD Annual Meeting.
- Special designation in the Annual List of Contributors, in all CSPD Bulletins and at the Annual Meeting
- Personal Annual Briefing by Foundation Trustees
- Invitation to the President's Circle reception at the CSPD Annual Meeting
- Mentioned by name at every social event during the CSPD Annual Meeting

- Corporate Life.....\$10,000 may be payable in up to 10 annual installments of \$1,000 each
- Corporate Sustaining.....\$5,000 may be payable in up to 5 annual installments of \$1,000 each
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Return to: **CSPD Foundation, 1215 K Street, Suite 940, Sacramento, CA 95814**

Student Group Activity Report for CA Pediatric Dental Residencies - Justin Shuffer, DDS

UCSF - Brent Lin, DMD

On July 23, 2012, UCSF School of Dentistry residents performed free dental screenings for dozens of children at the Bayview Opera House Sunday Streets event. As part of the Family Health and Wellness Fair, seven UCSF Pediatric Dentistry residents, Carrie Tsai, Yu-Hsing Kao, Jeremy Horst, Sheila Nguyen, Alexandra Malebranche, Amita Ruehe, and Will Liou, conducted oral exams and applied fluoride varnish for children on a walk-in basis. The Attending was Orapin Horst from UCSF Dentistry's Department of Endodontics.



The five-hour event, done in partnership with the California State Assembly and San Francisco Board of Supervisors, drew a total of 89 kids. District 10 Supervisor, Malia Cohen, brought her niece in for a screening.

Denti-Cal advisors also were on hand to educate families about oral health.

UOP - Jeff Wood, DDS

40 students attended the first meeting of the quarter. At this meeting, the new first year students were introduced to the study club and the student's had a presentation and discussion around the recent article in Pediatrics involving BPA and composite restorations and a possible link to learning disabilities. The presentation included both the news release as well as a review of the source article in Pediatrics. The discussion involved the quality of the article, areas for further investigation, and the AAPD response to the article. The presentation ended with suggestions on managing related patient/parent questions.

The AAPD student membership drive has begun. AAPD student membership is now mandatory for membership in the Pedo Study Club (though all activities are open to all students who wish to attend).

Future Planning for the remainder of the year includes:

- Quarterly (at minimum) meetings of the study club to include a program as well as review of a current literature article with discussion to follow.
- In September, oral health community outreach activity at AT&T Park by members of the Pedo Study Club.
- An October presentation by Delta Dental & Denti-Cal about fraud and management of insurance issues for pediatric patients. This will be sponsored by the study club and is open to faculty, staff, and students. We are arranging for faculty and staff to receive 1 CEU for attendance.
- We will have a Toys for Tots toy drive sponsored by the Pedo study club to start in late November and continue through the end of the year.
- Quarterly newsletter to the school from the Pedo Study Club with information relative to pediatric patients and oral health.

Western University of Health Sciences (WUCDM) - Justin Shuffer, DDS

WUCDM works with grant fund from First 5 LA to provide for the underserved community in El Monte. The program provides dental screenings for children from WIC, Head Start and Early Head Start programs, Kindergartens, and children in the San Gabriel Pomona Regional Center. Students also provide anticipatory guidance for the expecting mother and parents with children. The program includes dental procedures performed for this population at two school-based community dental clinics.

These activities are a part of the Clinical Service Learning & Community-Based Dentistry course that is continued through the four years of dental school.

WUCDM frequently offers Health Fairs at the San Gabriel Pomona Regional Center to promote oral health for children with special healthcare needs. Students and faculty perform dental screenings and triage the children in need to our student clinics at the Pomona campus.



CALL FOR APPLICANTS - Warren Brandli Leadership Internship

CSPD is accepting applications for the 2013-2014 Warren Brandli Leadership Intern program. This wonderful program for leadership development is specifically designed for both current pediatric dental residents or for those pediatric dentists who finished their postgraduate training in the past five years. The objective of the program is to introduce the selected intern to the inner workings of CSPD and help them learn the art of organizational governance and the importance of child advocacy. This will help provide young, hopeful leaders with the knowledge and confidence necessary to become further involved with CSPD, AAPD, CDA and other dental and related organizations. The internship serves as the true breeding ground for our future leaders in pediatric dentistry.

Participation within the program will require the intern to attend and participate in all CSPD and CSPD Foundation meetings for the year. The CSPD Foundation covers the participant's travel and lodging expenses. The selected intern(s) will be assigned a leadership mentor who will guide him or her throughout the year. The due date for the application is November 10, 2012. The term begins in April, 2013 at the CSPD Annual Meeting.

Applications and further information can be obtained on the CSPD Leadership Development page: www.cspd.org/leadershipdev/pdfs&docs/WBInfo&Application.asp

CSPD Welcomes Incoming Residents

Each year, CSPD contacts the California Society of Pediatric Dentistry Post-doctoral programs and requests information on their incoming residents. The program directors provide photos and profiles of their residents so that we might get to know them. If you encounter them, please encourage them as they enter into our pediatric dentistry family.

If your residents are not shown and you would like to include them, please contact Dr. Geraldine Hidalgo (ghidalgo@ucla.edu) or Dr. Susan Tavana (suzy.dds@gmail.com).

LLU School of Dentistry



Parisa Kermanshahi, D.M.D.

Dr. Kermanshahi graduated from the University of Nevada, Las Vegas dental school in 2010 and has been in private practice for the last two years in Las Vegas. During her free time, she enjoys running, hiking, traveling, scuba diving, and cooking. She is very excited to start residency at Loma Linda and looks forward to one day opening up her own practice.



Clinton Lepetich, D.M.D.

Dr. Lepetich's desire and determination to pursue pediatric dentistry stems from the experiences he had growing up in a large family of seven on an urban farm with many pets. He followed his ambition by graduating from the Arizona School of Dentistry and Oral Health and can't wait to continue his educational experience at a school with great tradition and notoriety. Outside of dentistry, he enjoys spending time with his wife, Michelle, and new daughter, Marlee Paige. When not spending time with them, he enjoys riding and competing in road and mountain bike events. He looks forward to being a part of the pediatric dental community and hopes to make many associations and contact that will continue throughout his career and life.



Michelle Shin, D.D.S.

Dr. Shin is originally from the Sacramento area in beautiful Northern California. In 2008, she received her B.S. in chemistry with an emphasis in biochemistry from Pacific Union College and received her D.D.S. degree from Loma Linda University in June, 2012. She is excited to start the pediatric dentistry program at Loma Linda and feels very blessed to be here. When she has free time, she likes to travel, snowboard, and spend time with her friends and family.



Khanh Truong, D.M.D.

Dr. Truong was born in Vietnam and made his way to America by escaping in a leaky fishing boat. Needless to say, his hobbies do not include fishing or swimming! However, he does enjoy land-bound activities such as cooking and eyeing new technological gadgets. After obtaining bachelor degrees in Computer Science and Biology, he traveled further away from water and found himself finishing his dental degree in the desert land of Las Vegas. Although he plans to eventually open a private practice, he also intends to combine his love for traveling and trying international cuisines by volunteering his time providing dental services for pediatric populations in underserved countries.

UCLA School of Dentistry - Venice



Patricia McClory, D.M.D.

Dr. Patricia McClory grew up in Ketchikan, a small island community in Southeast Alaska. She was inspired to join the dental profession and provide care for others who enjoy a rural lifestyle. In 2004, she left the Pacific Northwest to experience the East Coast and pursue a B.S. in Biology at American University in Washington, D.C. In college, she was fortunate to enjoy the diverse and vibrant culture of D.C., while finding time for childhood passions such as dance and gymnastics. After graduation, she continued farther north to Boston to complete her D.M.D. at Harvard School of Dental Medicine. While surviving the cold winters, she also enjoyed spending time volunteering for underserved pediatric populations such as those at Children's Hospital Boston where her Albert Schweitzer Fellowship took place. She feels so grateful to begin her pediatric dentistry training with UCLA and cannot wait to explore Southern California. After completion of her residency program, she looks forward to providing care to underserved populations on the West Coast.



Jack Yeung, D.D.S.

Dr. Jack Yeung was born in Hong Kong and spent his early years in the Far East. He spent most of his formative years in San Francisco and grew to love the rolling fog and political activism. Dr. Yeung graduated from the University of California, San Diego with a degree in Biochemistry in 2007. In 2012, after graduating from the UCLA School of Dentistry, he now begins his new journey at the CHAT/Venice pediatric dentistry program at UCLA.



Thawinee (Nini) Chaichanasakul, D.D.S., Ph.D.

Dr. Chaichanasakul was born and spent most of her childhood in Bangkok, Thailand before moving to Los Angeles, California. She graduated from UCLA in 2004 with a B.S. in Biology and then attended UCLA School of Dentistry where she received her D.D.S. degree with honors in 2009 and her Ph.D. in Oral Biology in 2012. Dr. Chaichanasakul is proud and excited to be a part of the UCLA Pediatric Dentistry program. Upon completion of her training in pediatric dentistry, her plans include attaining a faculty position, providing dental care in private practice and community settings, and teaching.



John Chen, D.D.S.

Dr. Chen grew up in Arcadia, California for most of his life after his family emigrated from Singapore. In 2008, he graduated from Pomona College in Claremont with a B.A. in Neuroscience and went onto receive his D.D.S. from UCLA in 2012. Outside of dentistry, he has been active in serving the children in the communities around him since high school and continues to be involved with such organizations as Reading to Kids. Upon graduation, he plans to go into private practice while maintaining a strong focus on community outreach.



Alex Griego, D.D.S.

Dr. Griego was born and raised in Albuquerque, New Mexico. He graduated from the University of New Mexico with a B.S. in Psychology and minor in Chemistry. While in college and for one year thereafter, he worked at Sandia National Laboratories as a lab tech in the polymer aging unit. He graduated from the University of Colorado School of Dentistry in 2006 and then completed an Advanced Education in General Dentistry in 2007 where he enjoyed working in the OR with special needs children. While working at a Medicaid children's clinic

in New Mexico for the past 4 ½ years, he realized that his scope was limited and that he wanted to treat his patients from start to finish. Dr. Griego decided to enhance his education at UCLA's pediatric residency program. Upon completion from this program, he plans to find a balance between working on special needs patients, teaching, establishing a dental practice, and giving back to his hometown where there is a great need for children's dental care.



Adele Newell, D.D.S.

Dr. Newell was born in Brooklyn, New York and raised in Lithonia, Georgia. She attended Xavier University of Louisiana where she received her B.S. in Chemistry in 2006. She received her D.D.S. from Columbia University in New York in 2012. Dr. Newell has a strong commitment to advocacy for infant and child oral health and plans to receive her Master in Public Health from UCLA. Upon completing the pediatric residency, she plans on entering community dentistry, private practice, teaching, and advocacy for underserved populations.



Konita Wilks, D.D.S.

A southern California native, Dr. Wilks grew up in La Canada, CA. She received her B.S. in Political Science from the United States Naval Academy in Annapolis, MD. Upon graduation, she served seven years as a Surface Warfare Officer in the U.S. Navy. Her combat experience includes serving in both Operation Iraqi Freedom and Operation Enduring Freedom in the Persian Gulf. In 2011, Dr. Wilks graduated with honors from the UCLA School of Dentistry and is a member of the National Dental Honor Society. She completed a General Practice Residency at Rancho Los Amigos National Rehabilitation Center where she treated adults and children with developmental disabilities such as autism, cerebral palsy, Down's Syndrome, and traumatic brain injury. She and her husband, Kyle, are the parents of a 2-year-old son, Kannon, and are anxiously awaiting the arrival of their second child in October, 2012.

Lutheran Medial Center - San Diego



Maynaz Heydari, D.D.S.

Dr. Heydari was born and raised in the small city of Damavand, Iran. She grew up a large family that valued education. In 1995, she and her son moved to the United States where she graduated from UC Berkeley with a B.A. in Molecular and Cellular Biology. While obtaining her D.D.S. degree from UC San Francisco, she became involved in a community clinic that provided dental care to homeless shelters. In 2005, she began working for La Clinica in Oakland and Vallejo where she developed her commitment to treat children who face economic and cultural obstacles to essential oral health and dental care. Dr. Heydari is proud of participating in several outreach programs in Solano County, CA where she has provided dental care for low-income and uninsured children. When not practicing, she enjoys painting, Persian calligraphy, writing short stories and hiking with her son in nature.



Grace Nantale, D.D.S.

Dr. Nantale was born and raised in Uganda, Africa. She graduated from Northeast State University in Oklahoma with a B.S. in Medical Technology and worked at Northwestern Memorial Hospital in Chicago as a medical laboratory scientist. She attended the UCLA School of Dentistry where she discovered her

passion for pediatric dentistry. This led her to volunteer in underserved communities both in the United States and abroad. As a dental student, Grace co-founded and served as President of the St. Paul the Apostle Young Adults' Ministry in the Westwood community. After earning her D.D.S., she completed a graduate practice residency at Northshore University Health System in Evanston, IL. She is excited to return to Southern California where she will continue to reach out to the needs of her community. In her free time, Dr. Nantale enjoys traveling around the world, biking, and experimenting with new, healthy recipes she collects from her travels.



Marina Nguyen, D.D.S.

Dr. Nguyen was born and raised in Vietnam after the war. In 1989, she was able to flee Vietnam on a small fishing boat and they eventually made their way to Florida. She graduated from the University of Florida with a BS in Chemistry and received her D.D.S. degree from Meharry Medical College where she developed most of her time to treating the low income children of Nashville, TN. Dr. Nguyen is very passionate about children and has developed her time to caring for the less fortunate children in the Atlanta area for the past eight years. She intends to continue to work with local community outreach programs upon completing her pediatric residency. She enjoys reading, exercising, and spending time with her son, daughter, family, and friends.



William Liou, D.M.D.

Dr. Liou was born and raised in Florida. He pursued his undergraduate studies at the Georgia Institute of Technology where he received his degree in Biomedical Engineering. He received his D.M.D. degree from the University of Florida where he was active in community service programs (Special Olympics Special Smiles and We Care) and various dental organizations (AAPD and Psi Omega Dental Society). Dr. Liou had the opportunity to spend a week in Ecuador working with underserved children at the local schools. In his free time, he likes to watch and play sports, particularly basketball and football.



Alexandra Malebranche, D.D.S.

Dr. Malebranche received her bachelor's degree in Health and Societies from the University of Pennsylvania. While in college, she participated in several community activities aimed at educating and mentoring West Philadelphia children and teens. She earned her D.D.S. in New York City at Columbia University School of Dental Medicine where she served the American Student Dental Association at both the local and national level as a writer and editor for several award winning publications. Dr. Malebranche also served on the board of Columbia's AAPD chapter where she organized oral health education events for local children. When not in the clinic, she enjoys writing, creating, exercising, and spending time with friends.



Amita Ruehe, D.D.S.

Dr. Ruehe was born in Santa Monica, CA and grew up in Korea and India. She completed her undergraduate studies at UC San Diego and studied abroad in England while in college. Her volunteer work at free dental clinics in San Diego helped influence her decision to become a dentist. She graduated from UCSF School of Dentistry in 2010

and was inducted into the Omicron Kappa Upsilon dental honor society upon graduation. While completing her GPR program at the Community Regional Medical Center in Fresno, CA, Dr.

Ruehe realized her desire to become a pediatric dentist. Upon graduation, she worked in Central California and in the Bay Area providing dental care to the underserved and low-income pediatric patients which she hopes to continue doing upon graduation from her pediatric residency. In her spare time, she loves to read, cook, watch movies, travel and spend time with her husband and chihuahua.



Julio Sotillo, D.D.S., PhD

Dr. Sotillo moved to Fargo, ND from Venezuela when he was 10 years of age. As a fellow in the Minnesota Craniofacial Researching Training program, he recently completed concurrent D.D.S./PhD degrees at the University of Minnesota School of Dentistry. His research examined the role of two key extracellular proteins and their regulation of bone cell development and skeletal remodeling. In recognition of his work, he was awarded the 2008 ASBMR Young Scientist award and the American Association of Oral Biologist award. In dental school, Dr. Sotillo served as class Vice President, student ambassador, and AAPD chapter officer. He was also honored with the Betzner scholarship, Continuing Student scholarship under the category of Academic Skill scholarship, and AAPD Dentistry award. His future interests include advancing pediatric dentistry through research, teaching, and clinical practice. Dr. Sotillo enjoys spending time with his wife and daughter as well as a variety of sports and the outdoors.



Chad Zillich, D.D.S.

Dr. Zillich was born and raised in Ann Arbor, MI. In 2005, he graduated from Michigan State University and, in 2009, he received his D.D.S. from the University of Michigan where he was President and Vice President of the dental fraternity, Delta Sigma Delta. In dental school, he was active in community activities including Give Kids a Smile and Special Olympics.

For the last three years, Dr. Zillich has worked in pediatric dental offices in rural Georgia and Colorado focusing on underserved populations. He and his family are excited for the opportunity to live in San Francisco and explore the city.



Dina Chehab, D.D.S.

Dr. Chehab was born in Portland, Oregon and grew up in Palm Beach Gardens, Florida. She received her bachelor's degree in Biology as well as her dental degree from the University of Maryland. One specific area of interest in pediatric dentistry is behavior management/modification. Dr. Chehab plans to enter private practice upon graduation. Her interests include hiking, music, and the New York Yankees.



Trishia Contreras, D.D.S.

Dr. Contreras was born and raised in southern California. She attended USC for both her undergraduate and dental degrees. She is interested in sedation, community health, and behavior management. Upon completion of the program, Dr. Contreras plans to work in private practice, teach, and be involved in humanitarian trips. Her interests include running, hiking, volleyball, snowboarding, and dancing.



Reena Grover, D.D.S.

Reena Grover was born and raised in southern California. After graduating from UC Berkeley where she earned both a B.S. in Business and a B.A. in English, she received her D.D.S. from the University of the Pacific. Her interests include special needs children, microleakage of composites and sealants, and behavior management. Dr.

Grover is married and has a small child. Upon completion of her residency, she would like to join a private practice in Southern or Northern California and teach part time. Her interests include arts and crafts, dancing, swimming, ultimate Frisbee, and novice triathlons.



Annie Huang, D.M.D.

Dr. Huang was born and raised in New Orleans, Louisiana. After receiving a B.S. in Biology from the University of Georgia, she received her D.M.D. from Harvard University. During her residency, she is looking forward to learning about craniofacial anomalies and emergency treatment. Upon graduation, she hopes to practice clinical dentistry. Her interests include exercising, painting, collecting seashells, and spending time with loved ones.



Ernest Nehrer, D.D.S.

Dr. Nehrer was born in Southern California but grew up in Santa Cruz, CA. He received a B.S. from UC Davis and a D.D.S. from UCSF. His areas of interest in pediatric dentistry are caries risk assessment and general anesthesia. Upon completion of the program, he would like to work in private practice on the west coast. His interests include traveling, golf, and basketball.



Rula Shalabi, D.M.D.

Dr. Shalabi was born and raised in Greenville, South Carolina. She received her undergraduate degree in Biology from Furman University and her D.M.D. from the Medical University of South Carolina. Her pediatric dental interests include children with disabilities and immunocompromised children. Dr.

Shalabi is married and plans to enter private practice after the program. Her interests include traveling, cooking, and baking.



Robert Stanislawski, D.D.S.

Dr. Stanislawski was born and raised in the southern California area. He received a B.S. in Biology from UC Santa Barbara and his D.D.S. from UC San Francisco. One specific interest is treating children with special health care needs. Upon graduation, Dr. Stanislawski plans to enter private practice and be involved in community dentistry. His interests include surfing, running, and hiking.



Vivian Yee, D.M.D.

Dr. Yee was born and raised in southern California. She received her undergraduate degree in Psychobiology from UCLA and her dental degree from Harvard. Dr. Yee is interested in global health and prevention. Her future plans include volunteering abroad, and working part time in both a hospital and in private practice. Her interests include traveling, running, and the ocean.



Western Society of Pediatric Dentistry Note From the President

John R. Ukich, DDS, WSPD President

Going into the fourth quarter of 2012, the state of the WSPD is great. We have a strong voice within the AAPD as we are the largest district in the country and arguably the most visible. The WSPD was host to the annual AAPD meeting in San Diego this past May where we saw a fantastic meeting with a record turnout and incredible speakers. We have many passionately involved dentists that give much of their free time to the improvement of organized dentistry and to providing the highest standard of care in the country. Recently, I had the state leaders of our district send me a report on the condition of their state as to leadership, access to care, and legislative issues. What follows is a synopsis of those reports.

The future of our profession is bright as we have strong representation from each state. Many young pediatric dentists are seeing the need to get involved and are stepping up to help shape our profession. Each state is getting better organized and drawing off the leadership and opportunities of neighboring states. We are always better together.

Midlevel providers are the hot topic in dentistry and we are seeing many of our pediatric dentists from WSPD getting involved at the state level. This is just what we need. Who knows this subject better than the pediatric dentists who are in the trenches each and every day? In Washington and California, pediatric dentists and their associations are investing time and resources to influence legislation for the long term benefit of our profession while everyone around the

country watches and waits to see the outcome. It is important that we stay on the front lines of this very important legislative issue.

Recently in the state of Washington, a bill was submitted by the Washington State Dental Association (WSDA) and passed in the House of Delegates allowing the use of an AFDA (advanced functional dental auxiliary) that is under the supervision of a dentist. This position can only be used in Federally Qualified Health Centers and there is a limit to two AFDA's per supervising dentist. The WSDA felt this was a necessary move to maintain control of the movement for a midlevel provider. Large National Foundations are spending millions of dollars to push the midlevel provider position through legislation and, without a bill put forth by the WSDA, it was apparent the dentists would lose control of this debate. WSDA has made it clear their intent in submitting this bill was to ensure adequate dentist supervision and insert safeguards to protect the public and the profession. As we watch these changes happening in neighboring states, one thing is clear. It is imperative that we stay on the front lines of this very important legislative issue.

Despite a theme of reduced Medicaid reimbursement, dentists in District 6 continue to treat those in need and there are countless stories of how pediatric dentists are giving back to the people in their communities through multiple programs outside the scope of Medicaid. Pediatric dentists continue to care for those children who are in need despite economic and reimbursement challenges.

Even with the challenges ahead, I see a great future for pediatric dentistry and I am pleased to say that WSPD/District 6 is leading the way.



District VI Update

Summary of the AAPD Board of Trustees Meeting

Santos Cortez, DDS, District VI Trustee

Now that the summer rush is over, the heavy lifting for most organizations begins. That's not to say that the summer months were idle for all committees. In Chicago in late June, the AAPD hosted the incoming trustees and officers to a Board Orientation Program and a two-day media training class which included "live" interviews by media expert Robin Wright. The participants were really grilled but we all survived! Subjects/issues covered included "access to care," "mid-level providers," "deaths of children sedated in dental offices," and so on. Though very stressful for the participants, the training was very beneficial and places the graduates in a position of "national spokesperson" for the AAPD.

WSPD President, Johnny Ukich, has appointed former CSPD Board Director, Jessica De Bord, as chair of an ad-hoc committee to develop and implement a process of identifying and advancing names of candidates to councils and committees of the AAPD. This process should make the nominations more transparent and will add to the pool of qualified volunteers. In the meantime, names will continue to be forwarded to the Nominating Committee representative for District VI, Richard Mungo, or to me. The timetable for implementation of this new committee may be 18-24 months.

I was appointed by the AAPD President to the Council on Continuing Education. From April 5-7, 2013, the AAPD will be presenting a course for general practitioners at the Marriott Union Square Hotel in San Francisco. I would like to request that CSPD make an effort to publicize this course as it reinforces previous collaborative efforts we have made with CDA to train our general dentist colleagues to feel more comfortable treating kids in their practices. In California, through the strong efforts of CSPD and CDA, the Pediatric Oral Health Access Program (POHAP) was developed and has trained hundreds of general dentists to provide oral health care for children less than five years of age. CSPD developed the program and its members taught some of the coursework.

The Academy will convene a joint session with the American Association of Endodontists (AAE) on November 9, 2012 in

Scottsdale, Arizona. The session will include the "Contemporary Management of Traumatic Injuries to the Permanent Dentition" which offers 13 units of C.E. credits. The AAPD is a registered provider of credits in California.

The AAPD Board of Directors has charged the Council of Government Affairs (CGA) to develop and implement a position of Public Policy Advocate (PPA) for each state unit and has requested states to submit two names to the CGA for ratification. The position is modeled after CSPD's PPA which has been so capably undertaken by Paul Reggiardo.

The AAPD is part of a coalition of dental organizations that partnered with the Ad Council to implement an advertising campaign on children's oral health. The three year campaign, which was rolled out on August 14th, targets underserved families and will provide basic oral health messaging. Here is the web site to view some of the public service announcements: www.2min2x.org. The roll-out has garnered much publicity and the Academy intends to do more public information on children's oral health in the months to come. AAPD President, Joel Berg, and other board members have been interviewed for several media markets throughout the country.

The Board of the California Society of Pediatric Dentistry met on September 15th in Oakland, California where it was reported by Public Policy Advocate, Paul Reggiardo, that SB 694, the bill that would provide for the establishment of a statewide Office of Oral Health directed by a State Dental Director and would also include a study of how RDA-EF and RDHs could be trained to do certain dental procedures under the supervision of a dentist, did not make it out of the Senate Appropriations Committee. There was great concern of establishing infrastructure within the Department of Health and Human Services that could not be financially supported by the General Fund.

The next meeting of the AAPD Board of Directors will be October 17th at the ADA Annual Session in San Francisco. As always, please feel free to contact me should you have any questions, ideas, or concerns about the District or the Academy.

Healthy Families is Transitioning its Beneficiaries to Medi-Cal Dental

For more information on the transition of the beneficiaries of the Healthy Families program to Medi-Cal Dental, please see the following link on the CSPD website: http://www.cspd.org/news/message.asp?news_id=532.

Thank you to our Sponsors for the 2012 CSPD/WSPD Annual Meeting!

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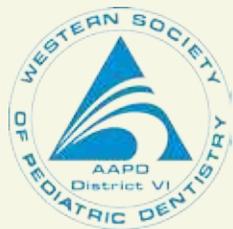


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CALIFORNIA PEDIATRICIANS WELCOME CSPD ASSOCIATE MEMBERS

Pediatric Oral Health issues are of primary concern for our pediatrician colleagues. With the advent of the establishment of the Dental Home and Oral Health Assessments the American Academy of Pediatrics needs our help and support. The AAP welcomes our members to join their organization as Associate members.

All interested CSPD members should contact their local California Chapters through www.AAP.org/membership section or they can contact Oariona Lowe at w.roslo@verizon.net for membership information.

Reading About Leadership

From the CSPD Leadership Development Committee

Looking for something new to read? In response to the request of our members, the Leadership Development Committee has compiled a list of reading materials on the topics of:

- 1) Organizational and Management Skills
- 2) Leadership and Team Management
- 3) Communication, Marketing, and People Skills

Whether you are interested in joining organized dentistry, already actively involved in leadership, or just looking for ways to better manage your dental team in private practice, this list is sure to have something that can help you become a better leader.

Have you read something recently that you feel belongs on this list? The Leadership Development Committee welcomes your suggestions. Follow this link to learn more: www.cspd.org/leadershipdev/

CSPD Professional Opportunities



- Opportunities Wanted
- Opportunities Available
- Faculty Positions Available
- Practices for Sale
Offices for Lease

Have you been thinking about hiring an associate, but just aren't sure where to look? Or are you finishing your residency soon, and aren't sure where you'd like to live and practice? The answer is right on the CSPD website. To look at these opportunities and others, go to www.cspd.org.

Upcoming Meetings & Continuing Education

CSPD

Jan. 13, 2013: CSPD Board of Directors Meeting in Los Angeles, CA.

April 25-28, 2013: [CSPD's 38th Annual Session](#) at Rancho Las Palmas Resort, Rancho Mirage, CA

March 26-31, 2014: CSPD's 39th Annual Session at Monterey Hyatt, Monterey, CA

AAPD

Oct. 26, 2012: [Dental Assistant's Course: Sedative & Medical Emergencies in the Pediatric Dental Office](#), Chicago, IL

Oct. 26-28, 2012: [Contemporary Sedation of Children for the Dental Practice: Enteral & Parenteral Techniques](#), Chicago, IL

Oct. 31, 2012: [NJAPD: John Rosemond - Parent Babble: How the Experts Ruined Parenting in America](#)

Nov. 9-10, 2012: [2013 - SSPD Annual Continuing Education Course](#), Atlanta, GA

Jan. 11-13, 2013: [Comprehensive Review Course](#), San Diego, CA

Jan. 25-27, 2013: [Comprehensive Review Course](#), San Diego, CA

Feb. 21-23, 2013: [Contemporary Sedation of Children for the Dental Practice: Enteral and Parenteral Techniques](#), Tampa, FL

Feb. 23-24, 2013: [Management of Pediatric Sedation Emergencies: A Simulation Course](#), Tampa, FL

April 5-7, 2013: [Comprehensive Pediatric Dentistry for the General Practitioner](#), San Francisco, CA

May 23-26, 2013: [AAPD 66th Annual Session](#), Walt Disney World Swan Dolphin Resort Orlando, FL
 2014 [Boston](#); 2015 [Seattle](#); 2016 [San Antonio](#); 2017 [TBD](#); 2018 [Hawaii](#)

See www.CSPD.org and www.AAPD.org for more sponsored courses.



Website Notes

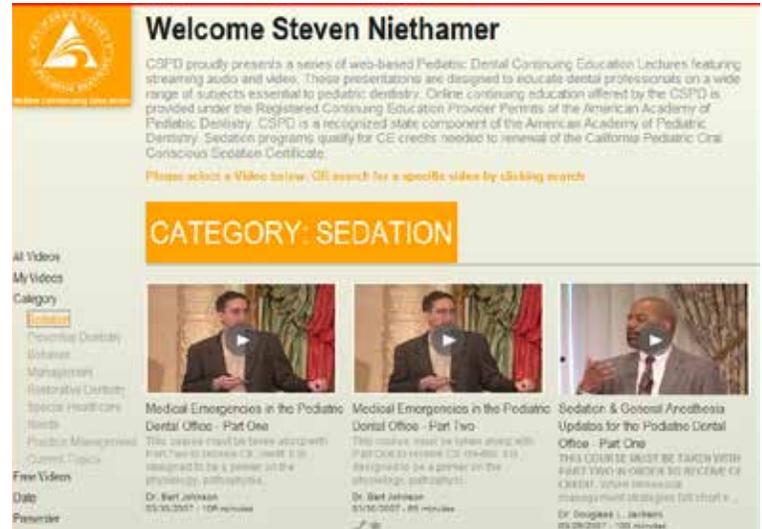
New Online Continuing Education Site Nearly Complete

Steve Niethamer, DMD, Website Editor

The Online Continuation Committee (OCE) apologizes for the OCE site being down. Unfortunately, the company with whom we started this project back in 2005 was purchased by another larger company which was purchased by a larger company which now isn't concerned with smaller accounts like ours. It seems like this process of buying out good companies certainly rewards the original owners but sometimes leaves the clients with less service.

The last few months have been difficult for some of our members and others who were depending on CSPD for the renewal of their dental license & OCS permit and couldn't wait for the site to go live. To help them, we set up a temporary system where OCE sends links to the programs with instructions on how to take the quizzes, pay the fees, and receive the CE certificates. This less automated system seems to be working.

The good news is that the new OCE portal is nearly complete and should be up and running soon after you receive this Bulletin. The OCE committee is excited about the potential this new OCE site holds for CSPD. Committee members will be able to upload videos, add quizzes, create certificates, and keep track of the site activity. Being able to add videos ourselves will greatly reduce the total cost of producing a program.



Screen capture of the new CSPD OCE website.

The Annual Meeting Event Page is Live

Be sure to visit the Calendar page of the CSPD website where you will find the 2013 Annual Meeting event site for Rancho Mirage. Information about next year's meeting will be added as it becomes available. A future link will allow you to register for the meeting online.

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