

# NEWSLETTER



Fall 2017 Vol 7 No 3

## Letter from the President



I hope everyone had a great summer. This fall I eagerly looked forward to the Ken Burns documentary on Vietnam. Some of us fought this war, some of our parents fought

this war, some were conscientious objectors, but all of us remember this war. However, it was an interview of jazz musician Wynton Marsalis by Ken Burns researching the film that I found most interesting. "Sometimes a thing and the opposite of a thing are true at the same time. Resist the desire to judge and decide, that is our work." Can this be true?

Do you stand with your hand over your heart for the national anthem? Would you take a knee as a silent protest to injustice? This summer continued as a tumultuous time in our country and internationally. There are times when I feel we are polarized to the point where we are groups of people sharing a continent rather than a country. Can competing and opposing views both be true?

Of course at some point we must

make judgments and decide. As dentists we do this hundreds of times per week. Do we replace, repair, restore, or extract. Is an implant the best choice or fixed prosthetics? In addition we consider patient autonomy, the patient's health, and financial situation. The decision to not treat a patient is a choice and in some instances is the best choice.

Dental practice has changed and is changing rapidly. W. Edward Deming stated it this way: "It is not necessary to change. Survival is not necessary". According to investment banks, the failure rate of dental practices are less than 1% and the margins for private equity groups to scoop up practices are high and they all want in. In this environment young graduates will have choices including solo practice, group practice, or joining a dental support organization. Is solo practice best or the camaraderie and efficiency of a group practice a best fit for you? What about joining a DSO? This decision is personal and depends upon perspective.

Dentistry is a very well respected and highly moral profession because it is a dentist and patient discussing options and deciding what is the best way forward

regarding care. I believe we are all concerned when a third party such as an insurance company or private equity company enters into the decision process. This is especially concerning when the decision is influenced by the end of the month corporate balance sheet as opposed to patient health and autonomy. I am confident that dentists in any practice structure will encourage the correct course.

So back to the start of this letter and the original question - is it possible for a thing and the opposite of a thing to be true at the same time? I think it depends on perspective and we need to try to communicate and understand each other. We need to welcome and support our new colleagues and accept this changing environment. This is also the best way to live up to the mission of this dental society and our purpose as dentists. I take pride and comfort in the cohesive nature of dentistry and this dental society.

It has been my pleasure to serve as your 2017 president. I am looking forward to next year when Dr. Jacob Merryman will become president of this dental society (Continued on page 2)

**Fourth District Dental  
Society of New York  
NEWSLETTER**

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This newsletter is the official publication of the Fourth District Dental Society. It is published three times a year: Fall, Winter, Spring/Summer. Unless officially adopted by the Fourth District Dental Society and so indicated, opinions expressed in this publication are not necessarily the views of the association.

Please contact the Fourth District office with changes to your home or office address, phone number, or email.

**News Updates:**

**Course 1 - February 2, 2018**

*"R2CTM- The Root to Canal Solution"* presented by Troy McGrew, DDS, MS at the Century House, Latham, NY.

**Course 2 – March 2, 2018**

*"Ask and Ye Shall Receive: The Art of Getting to Yes" (AM Session)* presented by Mark E. Hyman DDS, and *"Time is Money: Clinical Efficacy Through Material Evolution" (PM Session)* presented by Gregor Connell at the Century House, Latham, NY.

**Course 3 – April 13, 2018**

*"Preventive & Restorative Dentistry Working in Concert for Best/Most Predictable Outcomes"* presented by Pamela Maragliano-Muniz, DMD at the Century House, Latham, NY.

**Saratoga Dental Congress 2018**

Save the date for the next SDC on **May 10 and 11, 2018**. Speakers will include Dr. Jeffrey Okeson, Dr. Roy Shelburne, Dr. Tieraona Low Dog and Ms. Nancy Dewhirst. MedCourse Staff will once again present CPR/BLS for 2 sessions on Thursday and one on Friday morning.



**CE and Golf – September 7, 2018**

Next year's CE and Golf outing is scheduled to be held on Friday, **September 7, 2018** at the Hiland Golf Club in Queensbury.

**Course 4 – October 26, 2018**

*"A Sound Recession Proof Restorative/Hygiene Practice: Integrating the Team and Creating Value"* presented by Lou Graham, DDS at Fort William Henry Resort, Lake George, NY.

**Letter From the President**

(Continued from page 1)

and we celebrate our 150<sup>th</sup> anniversary. There are many events planned to celebrate this milestone; details will follow in the coming months. In closing, I wish to thank our Executive Director, Lynn Martin, for all she does for this society and all the volunteer board members for the value they add and provide to all of us. Lynn and all the volunteers continue to keep dentistry the great profession that it has always been and continues to be.

Sincerely,

Richard J. Hoskinson, DDS

## HIPPA and Golf

The Fourth District Dental Society held its Annual CE and Golf outing on September 8, 2017, in the picturesque north country setting of Hiland Golf Club in Queensbury. Dr. Craig Ratner, Chair of the NYS-DA Information Technology Committee, presented “HIPAA Security Compliance: Protecting Your Patients, Your Practice and Yourself” to 91 dentists and staff. Dr. Ratner covered specific requirements related to the safeguarding of electronic patient data and upon completion of the course, each office received the *NYSDA HIPAA Security Compliance Manual*, a practical guide that also includes forms and checklists for dentists and their teams. Attendees found the presentation approachable and the information valuable.

Once the CE course concluded, 61 golfers, some of them CE participants, made their way to the golf course. After a box lunch and 18 holes, the 1<sup>st</sup> place finishers were teammates Dr. G. Kirk Gleason, Dr. H. John Schutze, and Saratoga National Bank & Trust Company representatives, Chad Stoffer and John Marcantonio. Dinner was also provided and what little bit of rain fell during the afternoon, did not dampen any enthusiasm!

### Team Results:

#### **1st Place:**

Kirk Gleason  
H. John Schutze  
Chad Stoffer  
John Marcantonio

#### **2nd Place:**

Jim Galati  
Craig Ratner  
Joe Sheridan  
John Klingbeil

### Course Contests:

Longest Drive (Hole 10) – John Klingbeil  
Straightest Drive (Hole 12) – Steve Dautel  
Closest to the Pin (Hole 3) – Dave Parsons  
Closest to the Pin (Hole 6) – Roy Oyangen  
Closest to the Pin (Hole 11) – Bruce Dedon  
Closest to the Pin (Hole 15) – Frank Lanzillo

## Women Dentist Meeting

Twenty seven Women dentists gathered for dinner and continuing education at the Van Patten Golf Club on Thursday, October 26, 2017. Drs. May Hwang and Amanda Marx co-hosted the event which was sponsored by Bank of America, MLMIC and CC Plus.

Fourth District member and speaker, Dr. Alexandra Porcu, opened the program with a discussion of her recent mission work. Working with the Madagascar Ankizy Fund, Dr. Porcu helped provide dental treatment to a severely under-served population where there are only 57 dentists in a country of 22 million people. In Zambia, Dr. Porcu worked with Halo Missions to provide dental care outside of the city of Ndola. She illustrated some of the challenges of providing dental care in such a rural setting, as well as striking examples of pathology that were referred to a regional hospital. Dr. Porcu also spoke to some of the non-dental needs of the communities. Their team was able to aid in securing school uniforms, water collection and irrigation systems. There was much interest from the audience about going on a dental mission trip.

The evening continued with an engaging presentation “Conflict Be Gone!” by national speaker and practice management guru, Shelley Renee. Ms Renee spoke about conflict in the dental office and offered a systematic way to “untangle” the problem. She reminded the dentists that the biggest mistake is to fail to take action when faced with conflict. With participation from the attending dentists, she illustrated the need for positive and negative feedback in order for team members to be effective at fulfilling their function. Ms. Renee also fielded questions from the attendees about current conflicts in their offices. It was a reminder that the outcome of conflict can be a positive one, if the conflict makes you take notice and take action.



Ms. Shelley Renee and  
Dr. Bettina Pels-  
Wetzel



Drs. Erin McNamara  
and Amanda Marx



Dr. Alexandra Porcu



Ms. Shelley Renee



## Ellis Dental Clinic: Treating and Training since 1975

If you live in the Capital District, it is likely that you know about Ellis Dental Clinic. Every year, thousands of patients of all ages turn to Ellis Dental Clinic for a comprehensive range of dental services. Each patient is assigned a primary dental care provider who oversees his or her care, and dental hygienists provide preventive care and screenings.

Ellis Dental Clinic also serves as the training facility for Ellis Medicine's Dental Residency program. This program, established by the former St. Clare's Hospital, has been successfully educating future generations of dentists since 1975. Many dental residents choose to practice locally after graduation. Since the program's inception, 131 dentists have completed the program and 76 of them are employed in the region.

Many of the past residents have been from SUNY Buffalo, where the program is very well known. As word of the program has grown, Ellis now attracts students from a wider geographic region; this year's residents including students from SUNY Buffalo, NYU, Pittsfield, and Temple University, PA. In fact, for the past five years the program has matched with their four top choices.

Participation from dentists in the community has been crucial in the success of the residency. The DeLuke Family has been instrumental in program development as attending dentists and mentors, as well as with their donations. As a result of the DeLuke's generosity, this residency offers what few other facilities do, exposure to the technology of the future with the intraoral scanner and dental laser.

This information was provided by Dr. Diana Sandu, Director of Ellis Dental Care and the Ellis Medicine Dental Residency Program. Any inquiries on how to work with or support the residency may be directed to Dr. Sandu at sandud@ellismedicine.org or 518.347.5268



Dr. Donald DeLuke receiving the 2017 Teacher of the Year Award



(L to R, back row) Dr. Catlin Deitz-Graziano, Dr. Marta Michalik, Dr. Kristen Lysenko, Dr. Alexandra Porcu, Dr. Conrad Howe, Dr. Steven Oshins, Dr. Diana Sandu (L to R, front row) Dr. Tom Lanka and Dr. Donald DeLuke



(L to R, top row) Dr. Tom Lanka, Dr. Conrad Howe, Dr. Steven Bauman, Dr. Diana Sandu (L to R, bottom row) Dr. Alexandra Porcu, Dr. Kristen Lysenko and Dr. Marta Michalik

## New Dentist Meeting

The Henry Street Taproom played host to the 2017 New Dentist meeting on October 19<sup>th</sup>. Twenty new dentists and three residents joined the group of five vendors who participated in an energetic speed-dating format. Industry representatives from accounting, finance, insurance, law and practice transitions were on hand to answer questions and present material. Thank you to our sponsors: Chad Widensky from Bank of America and Barbara Gottstein of MLMIC. Three others also took part in the Saratoga event: Sean Hudson from Hudson Transitions, James Blowers from JEB CPA Solutions and Graig Zappia, Esq., from Tully Rinckey, PLLC. New Dentist Chair, Dr. Laura Johnstone, assembled a terrific program in a casual atmosphere that was enjoyed by all.

### Corrections

In the previous newsletter, SDC 2018 speaker Dr. Tieraona Low Dog's name was mistakenly listed incorrectly.

Dr. Laura Johnstone's email address should have been listed as laurajohnstone85@gmail.com

## Ethics Corner—What would you do? - Jonathan Schutze, Ethics Committee

Just over 3 years ago, Dr. Boley began practicing general dentistry in a community of 10 dentists. One of them, Dr. Leeds, has been in practice in the community for over 30 years and treats many of the older residents, who are very loyal to him as one of the “old-timers.” During one of Dr. Leeds’ infrequent absences, Ms. Wentworth, a longtime patient of Dr. Leeds, visited Dr. Boley for emergency treatment, which involved dental work recently completed by Dr. Leeds. Ms. Wentworth presented the sixth unsatisfactory case of Dr. Leeds’ work that Dr. Boley had observed during the past two years. In Ms. Wentworth’s case, an infected root tip had been left close to the sinus following an extraction and caused her considerable pain. After Dr. Boley recommended that the operation site be opened to remove the root tip, Ms. Wentworth questioned Dr. Boley about why Dr. Leeds had not removed the root tip at the time of the initial operation. She also asked about the quality of Dr. Leeds’ care in general.

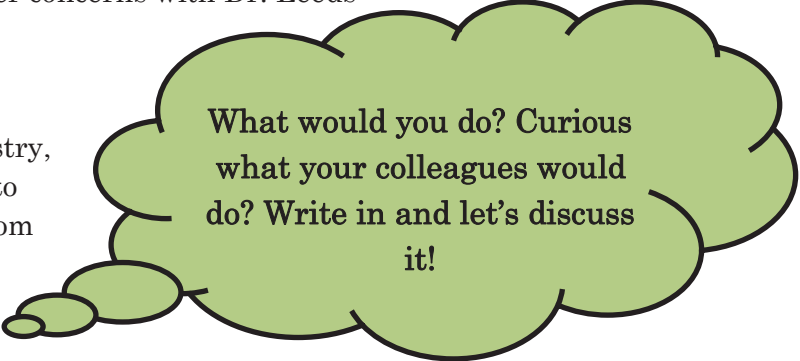
It had been apparent to Dr. Boley for some time that Dr. Leeds had not kept up with the latest advances in dentistry and that both his technical ability and his clinical judgment were slipping. Ms. Wentworth, for example, suffered from advanced periodontal disease and needed replacement of almost all restorations. Ms. Wentworth reported to Dr. Boley, however, that Dr. Leeds had recently told her that she required no additional dental care.

You are now faced with an ethical dilemma. Check the course of action you would follow and email, mail or fax this page, or a note indicating your choice as instructed below

1. Say or do nothing
2. Discuss the problem with a colleague or friend
3. Contact a member of the local peer review committee and discuss the case with him/her without mentioning the dentist
4. Report the dentist to the local peer review committee
5. Recommend that the patient review her case with a lawyer
6. Recommend to the patient that she discuss her concerns with Dr. Leeds
7. Contact Dr. Leeds to discuss your concerns
8. Other alternative. (please explain)

Send Your Response Attention:

Jonathan Schutze DMD, Schutze Family Dentistry,  
453 Dixon Road, Queensbury, NY 12804 or fax to  
(518) 793-5695, or email at: drjschutze@gmail.com



What would you do? Curious  
what your colleagues would  
do? Write in and let's discuss  
it!

## Ethics Corner—Last issue’s response

Last issue we were presented with the case of patient Arthur Green, P.h.D., who was resistant to periodontal therapy and wanted to “skip all the gum work and start the bridges!”. All respondents stated that they would not do fixed bridge restorations for the periodontal patient with horrendous home care and a horrible attitude until his oral hygiene improved. The following are some of the responses from Fourth District members.

“Personally would refer patients with such diagnoses to a periodontist and be cleared by the specialist. Moreover with the patient's poor oral hygiene and only ‘driven’ by his dental insurance coverage would indicate that the patient and the primary dentist (myself) wouldn't be a good fit. Not worth the ethical and legal liability. Still would have patients sign a disclosure under normal circumstances.”

“I would have a heart-to-heart conversation with Dr. Green. At that time, I would explain that I could not morally nor ethically move forward with bridges until his oral hygiene improved. I would mention that there are plenty of dental offices who would be happy to take his money and move forward with his bridges. I would NOT make a formal referral however!”

## **Paid Family Leave Law - January 1, 2018** (adapted from the NYSDA website)

This important law applies to all employers in New York State, including *all* dental practices, regardless of size or type--no exceptions, no exemptions. The New York State Paid Family Leave Law takes effect on Jan. 1, but employers have been able to make payroll deductions to finance the program since last July. The New York State Department of Financial Services has set the allowable payroll deduction rate for an employer to implement the family leave program. The maximum employee contribution in 2018 is 0.126% of an employee's weekly wage, up to the annualized New York State Average Weekly Wage. While an employer must pay for the program, the option of using employee payroll deductions makes it a no-cost program for employers. The intent of the law was for employees to completely fund the program through a payroll deduction system. While employers have the option to pay for the program themselves, instead of using employee payroll deductions, that is not expected to be a common choice.

Coverage for the program is provided through an employer's Workers' Compensation disability benefits insurer; every dentist should be in contact with his or her insurer to set up the paid family leave program. This is a critical employer benefit obligation, and there are serious consequences for failing to implement the paid family leave program. Noncompliance can lead to costly claims under Section 120 of the New York State Workers' Compensation Law.

### **What the Law Covers**

The law guarantees employees the following:

- Wage replacement for 8 weeks in 2018, increasing to 12 weeks by 2021.
- Job protection upon return from paid family leave, defined as returning to the same job or a job comparable to the one the employee held prior to taking leave.
- Continuation of health insurance while out on paid family leave. Employers may require that employees continue to pay their health insurance premium contributions.

Employees can seek paid family leave for the following broad reasons:

- When paid leave is necessary to provide care, including physical or psychological care, to family members due to a family member's serious health condition.
- To bond with a newborn child during the first year of the child's life or, in the case of adoption or foster care placement, for the first year after placement of a child with the employee.
- For any qualifying reason as provided for under the federal Family and Medical Leave Act arising from the employee's spouse, domestic partner, child or parent being on active military duty or, alternatively, being notified of an impending call or order to active military duty.

An employer may not discriminate or retaliate against employees for taking or inquiring about paid family leave. Employers must ensure that their employees are aware of the paid family leave program and that their policies comply with the law. Specifically, employers should:

- Include paid family leave information in their employee handbook or similar employee materials.
- By Jan. 1, 2018, display a poster regarding paid family leave coverage in their place of business, similar to the poster required for Workers' Compensation or disability benefits coverage. The employer's insurance carrier will supply this poster.

### **Who is Covered**

Employees with a regular work schedule of 20 or more hours a week are eligible after 26 weeks of employment. Employees with a regular work schedule of fewer than 20 hours a week are eligible after 175 days worked. In limited circumstances, employees whose regular work schedules are temporary or seasonal may opt out of paid family leave. When practical, employees should provide 30 days advance notice of their intention to use paid family leave.

Benefits phase in over four years (Table 1). In 2018, employees are eligible for up to eight weeks of paid leave at 50% of their average weekly wage (AWW), up to 50% of the (continued next page)

(continued from previous page) New York State Average Weekly Wage (SAWW). Thereafter, the schedule of benefits is as follows each year: 2019 – 10 weeks at 55% of employee’s AWW, up to 55% of SAWW; 2020 – 10 weeks at 60% of employee’s AWW, up to 60% of SAWW; 2021 – 12 weeks at 67% of employee’s AWW, up to 67% of SAWW.

Finally, dentists should use the following checklist to ensure compliance with the Paid Family Leave Law:

1. Employers should contact their disability insurance carrier about obtaining paid family leave coverage.
2. Employees are entitled to be reinstated to their same or comparable job upon return from paid family leave.
3. Failure to reinstate employees to their same or to a comparable job may leave employers exposed to discrimination and/or retaliation claims.
4. Employers must continue employees’ health insurance while they are on paid family leave. Employers may require that employees continue to pay their health insurance premium contributions.
5. Employers must ensure that their employees are aware of the paid family leave program and that their organizational policies comply with the law.
6. Employers must display a poster regarding paid family leave coverage in their place of business, similar to Workers’ Compensation or disability benefits coverage.

Call (844) 337-6303 or go to [www.ny.gov/paidfamilyleave](http://www.ny.gov/paidfamilyleave) if you need help setting up your paid family leave program.

## Life Members for 2018

**Dr. William Caldon**  
**Dr. Peter Gold**  
**Dr. William Green**  
**Dr. Jeanne Grosso**  
**Dr. David Kaplan**

**Dr. Patrick McCullough**  
**Dr. Michael McGovern**  
**Dr. William Perez**  
**Dr. Steven Wilson**

## New Members

**Dr. James Lewis**  
 Pedodontics  
 Temple University  
 Smile Lodge, Clifton Park

**Dr. Ahmed Farag**  
 General Practice  
 Alexandria University Dental School, Egypt  
 Alice Hyde Dental Center, Malone

**Dr. Nas Sediqi**  
 Oral Surgery  
 SUNY Buffalo  
 Saratoga County OMS

**Dr. Christopher Goodell**  
 Pedodontics  
 Harvard School of Dental Medicine  
 Smile Lodge, Clifton Park

**Dr. Michael Sheehan**  
 General Practice  
 Georgetown University  
 Practices in Glens Falls

**Dr. Danny Kang**  
 Pedodontics  
 Stony Brook School of Dental Medicine  
 Pediatric Dental Group of NY, Glens Falls

**Dr. Vijaya Gaddam**  
 General Practice  
 NYU  
 Practicing with Dr. V. Nagpal in Schenectady

**Dr. Alexandra Porcu**  
 General Practice  
 Stony Brook School of Dental Medicine  
 Practicing with Dr. Green in Saratoga Springs



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