

MOUTHPIECE

smcds.com

In This Issue:

- Message From Our President
- Dentistry's Changing Workforce Composition
- COVID-19...A Personal Experience
- DSO Agreements - Are They Right For You?
and much more.....

2021 Member Events Calendar

See upcoming events at www.smcds.com for details and registration.

New / revised course info highlighted in **bold text**

AUGUST						
DATE	DAY	TYPE	TOPIC	SPEAKER/CONTACT	LOCATION	TIME
5	Th	CE1	SMCDS Member Symposium <i>Social Determinants of Health (SDOH): Diabetes and Oral Health, What is the Connection?</i>	Kim Lucas Benton, DDS, MPH	Webinar	6:30-8:30 P
10	Tu	PM&CE1	Covid-19 Changing Guidelines: Everything California Dentists Need To Know	Nancy Dewhirst, BS, RDH	Webinar	6-7 P
10	Tu	G	<i>Tentative</i> SMCDS Executive Board Meeting	President: Brad L. Hart, DDS	N/A, Zoom	6:30-8 P
19	Th	PM	Dentistry's Changing Workforce Composition and The Age of Digital Transformation	Christine Sison	Webinar	6:30-7:30 P
28	Sa	FMB	Shredathon: Document Shredding, eWaste, & Lead Foil	Jim Aicardi 650.637.1121	SMCDS	9-12 P
SEPTEMBER						
6	M	H	Labor Day Holiday	SMCDS Office Closed		
7	Tu	PM&CE1	HIPAA Training: Is Your Practice Safe?	Jeff Broudy	Webinar	6:30-8 P
9-11	Th-Sa	CE1/2	CDA Presents: San Francisco	Multiple	Moscone & Webinar	All Day
13	M	RCE	BLS CPR Renewal Course	Richard A. Fagin, DDS	TBA	6-7:30 P
21	Tu	G	SMCDS Leadership Meeting	President: Brad L. Hart, DDS	TBA	6:30-8 P
24	F	RCE	Infection Control ■ CA Dental Practice Act ■ Cal-OSHA	Marcella K. Oster, RDA	Webinar	8:15-2:45 P
28	Tu	RCE	BLS CPR Renewal Course	Stephen R. John, DDS	TBA	6-7:30 P
OCTOBER						
7	Th	SCCE	SMCDS Study Club	SMCDS Study Club Members	TBA	6:30-9 P
12	Tu	G	SMCDS Executive Board Meeting	President: Brad L. Hart, DDS	TBA	6:30-8 P
18	M	RCE	BLS CPR Renewal Course	Richard A. Fagin, DDS	TBA	6-7:30 P

EVENT TYPE	
AR	Allied Dental Relations
CE1	Core CE
CE2	20% CE
CO	Community Outreach
FMB	Free Member Benefit
G	Governance

EVENT TYPE	
H	Holiday
HWS	Hands-On Workshop
L	Leadership
NDS	New Dentists Social
PG	Personal Growth
PM	Practice Management

EVENT TYPE	
PM1/4	Pract Mgmt 1=New Dent 4=Life Active
PS	Professional Success
PS1/4	Prof Success 1=New Dent 4=Life Active
RCE	Required CE
S	Social Event
SCCE	Study Club CE



2021 Executive Board

President: Brad Hart, DDS

President Elect: Purvi K. Zavery, DDS, MS

Treasurer, Secretary: Pinal M. Viraparia, DDS

Immediate Past President: Ben Yount, DDS

2019 Past President: Sara A. Andrews, DDS, MS

CDA Trustee: Benson Wong, DDS

Executive Director & Editor: Nakia Brandt

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President's Message

Brad Hart, DDS

Hello fellow colleagues! The past year and half has been one big blur. SMCDS has been hard at work to maintain the responsibilities of the Society during these challenging times. Our Executive Director, Nakia Brandt and our office staff, Jim and Mike have put in countless hours along with our Leadership Council to maintain and progress the objectives of our society. We had a very successful society headquarters purchase and are excited to invite you to upcoming open house events. We have also held regular CE programs via Zoom to assist with license renewal, but now we are preparing to return to in-person meetings and the response from our membership has been unwavering to say the least!

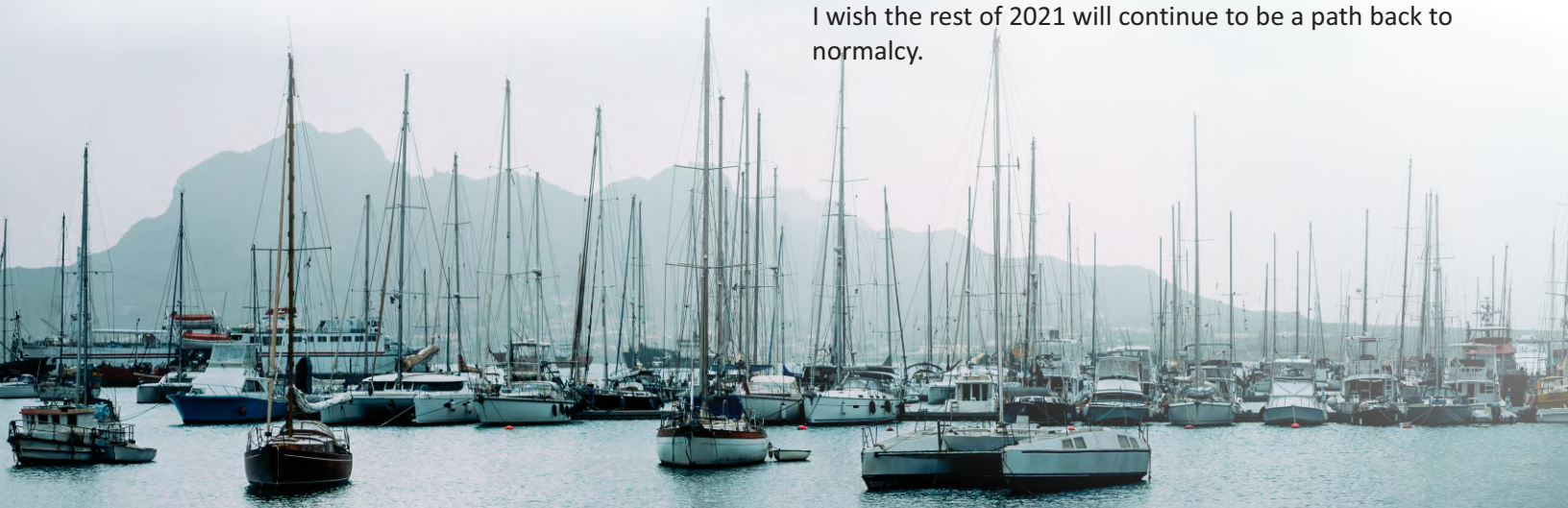
I hope that many of you will be able to attend our in-person General Membership Meeting on Thursday, November 18, 2021 from 6:30pm to 9:00pm at the Crowne Plaza Hotel in Foster City. Our speaker for the night will be Dr. Anthony Cardoza and he will cover Dental Forensics. Dr. Cardoza has assured us that it will be an interactive presentation. It will be great for all of us to finally meet again in-person and we have missed you so much. We are working very closely with the Crowne Plaza to ensure all precautions are in place for the safety and comfort of our members and staff. A live stream will also be available for dentists and their staff if they cannot attend or would prefer to participate from home.

Miraculously, we have not only managed to maintain much of our programs and purchase a new society home, but we have also kept the dental society in good financial standing. It is the Leadership Council's mission to serve you and better your dentistry and workplaces and that is why we are working to create new programs to assist you with staffing and practice management.

SMCDS is also excited to continue our new study club and bring the meetings back in-person at the dental society's office. Dr. Sara Andrews is the president of the SMCDS study club and in these sessions you will get the opportunity to engage with colleagues in all areas of dentistry, discuss case studies, and share knowledge. Please contact the dental society if you are interested in joining the study club.

I thank all of you who have generously volunteered your time and talents to our society and to our proud profession of dentistry. If you are curious about leadership, I encourage you to consider joining the Leadership Council to maintain and promote our society. As your president, I am always available to discuss ways in which you can join us in this goal.

Again, I look forward to seeing all of you at our November General Membership Meeting as well at the new SMCDS headquarters open houses. Thank you for allowing me to serve as your President this year and with great hope, I wish the rest of 2021 will continue to be a path back to normalcy.





Trustee's Message

Benson Wong , DDS

CDA continues to make membership so valuable for California dentists. Several months ago you may recall that Delta Dental had tried to cut fees for periodontists, endodontists, and oral surgeons. CDA fought for these groups arguing that Delta's rationale for reducing fees was no longer relevant during the pandemic. As a result, Delta chose to delay implementation of the fee reduction. CDA continues to advocate for California dentists to support what is right for both dentists and their patients.

Even in the shadow of the pandemic, CDA's 2021 membership renewal rate is on pace to be higher than 2020 and only 4% down from 2019. Each year indicates a slight fluctuation in membership renewals so the concern was that 2021 would see a dramatic reduction due to economic concerns from COVID. The increased renewal rate is a strong reflection of how helpful and valued CDA was to members in 2020. Speaking personally, I felt the updates from CDA were extremely informative and timely in easing the concerns we all had during the shelter-in-place period last year. A true highlight for CDA.

CDA receives 700 calls per month through Practice Support. It gives members answers to their questions regarding dental benefit plans, employment practices, practice management, and regulatory compliance. Did you get the latest employment poster set? You can thank CDA Practice Support. Utilizing the services offered by CDA Practice Support can also help you save on consultant fees. A valuable member benefit from CDA.

For those members who use TDIC, you can look forward to some changes which may come by the time you read this message. TDIC is overhauling its internal systems which will allow policy holders online access to their insurance information, pay bills, file and track claims, and have online chats with customer support.

Be sure to take a look at CDA Presents 360. This will be CDA's online CE offerings. The library will continue to grow so keep an eye on it. There is even discussion that the local components may be able to post their online CE offerings as well to reach a wider audience.

Lastly, it's not a member benefit but an update in the governance structure at CDA. For the past several years, CDA has been working on reducing the size of the Board of Trustees to streamline decision making and allow for more in-depth discussions within the Board. The Board Composition proposal would eliminate the 50-member Board of Trustees and Executive Committee. In its place would be a Board of Directors (Board) with 17 members who are nominated and elected. An additional body called the Board of Component Representatives (BCR) would consist of 32 members representing each local component of the CDA. The Board would be the decision-making body for CDA while BCR would bring all the local components together to share ideas and discuss local component issues that need to be brought up to CDA. The Board Composition proposal was recently approved with well over the 67% needed to pass by the Board of Trustees. The next step for final approval will occur at the upcoming CDA House of Delegates meeting in November where 67% will also be needed for approval. Once approved at the House, the new Board structure will begin in 2022. Stay tuned...



New Members

Welcome!

*Join us in celebrating 12 new members
contributing over the course of
the second quarter of 2021, to the
voice that is SMCDs - 647 strong ...*

Aria A. Asemi, DDS

UOP - 2021 - GP

Ashley S. Chan, DDS

UOP - 2021 - GP

Sandra Chang, DDS

UOP - 1993 - GP

Francis Earvin Delos Reyes, DDS

UCLA - 2021 - GP

Eunice I. Gonsalves, DDS

NYU - 2015 - GP

Anjalika A. Kc, DDS

UOP - 2021 - GP

Sheila Y. Kodani, DDS

UOP - 1999 - GP

Alexis Lee, DDS

UOP - 2021 - GP

Yidi Liu, DDS

UOP - 2021 - GP

Kevin B. Magana, DDS

UOP - 2021 - GP

Galina Miciu-Nicolaevici, DDS

UOP - 2021 - GP

Catherine O. Young, DDS

NYU - 1999 - GP



Thank You!

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who have generously supported our
continuing education, professional success,
practice management, workshop/clinical
programs this past quarter.

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Swiss Monkey

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BIOS Strategic Partners

Bayside Realty Partners

Berube Company Inc.

California Dental Association

Dental Power Placement Service

LPA Dental Lab

Michael Lam, MD

Northern California Practice Sales

Member Specialist Spotlight



Endodontists

SMCDS has **19** member endodontists spread throughout San Mateo County.

Rowshan Ahani, DDS, MS

Bayside Endodontics
333 Gellert Blvd Ste 242
Daly City, CA 94015-2660
(650) 757-3636

Mat A. Barkhordar, DDS

Peninsula Specialty Dental Care
562 Ralston Ave
Belmont, CA 94002-2832
(650) 654-1854

Kurt R. Finley, DDS

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Palo Alto, CA 94301-2123
(650) 328-6356

Jerry H. Lin, DDS

1828 El Camino Real Ste 803
Burlingame, CA 94010-3124
(650) 328-6356

David D. Moore, Jr., DDS

Endodontic Associates
235 N San Mateo Dr Ste 400
San Mateo, CA 94401-2672
(650) 340-0225

Sajini Sasthri-Rajaputrage, DDS

333 Gellert Blvd Ste 242
Daly City, CA 94015-2621
(650) 757-3636

Jean A. Yang, DMD, MMSc

Laurel Endodontics
1178 Brittan Ave
San Carlos, CA 94070-3929
(650) 654-3636

Gregory K. An, DDS, MPH

Woodside Endodontics
1690 Woodside Rd Ste 209
Redwood City, CA 94061-3402
(650) 369-2555

Peipei Chang, DDS

11 Birch St Ste 108
Redwood City, CA 94062-1481
(650) 568-9889

Jennifer M. Fong, DDS

Bayside Endodontics
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Daly City, CA 94015-2660
(650) 757-3636

Maria B. Manaloto, DDS, MS

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South San Francisco, CA 94080-5413
(650) 873-1391

Victoria E. Moore, DDS

Endodontic Associates
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(650) 340-0225

Daniel J. Simon, DDS, MMSc

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(415) 566-2313

Lynne A. Baldassari-Cruz, DDS

San Carlos Endodontics
1028 Laurel St
San Carlos, CA 94070-3919
(650) 595-3722

Fred R. Cho, DDS

Endodontic Associates
235 N San Mateo Dr. Ste. 400
San Mateo, CA 94401-2672
(650) 340-0225

Nancy Huynh, DDS

Redwood Shores Endodontics
358 Marine Pkwy Ste 400
Redwood City, CA 94065-5212
(650) 592-6066

Marshall J. Michaelian, DMD

341 Gellert Blvd Ste C
Daly City, CA 94015-2616
(650) 994-2710

Victor A. Peritore, DDS

South San Francisco Dental Care
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South San Francisco, CA 94080-5413
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Jessy I. Tseng, DDS

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(650) 340-0225

Member Acknowledgments



SMCDS Member and CDA Secretary, Carliza Marcos, DDS, volunteered at the University of Pacific, Arthur A. Dugoni School of Dentistry. Dr Marcos is seen here administering a COVID-19 vaccine for CDA's Executive Director, Peter DuBois.



In Memorium

We are saddened by the loss of ...



Nile G. Porter, DDS – Pacifica General Dentist and SMCDS member of 48 years - passed away January 11. Dr. Porter graduated St. Louis University 1962 and retired in 2004. He was very involved in community service and associations (Rotary, Chamber of Commerce, Crystal Gazers of San Francisco, San Francisco Gem and Mineral Society, San Mateo Forensic Society). He spent many years faceting precious and semi-precious gemstones, many of which he mined himself in the Pacific Northwest. This faceting hobby also included attending gem shows and collecting books on gemology for his library. Nile won numerous awards and has a Danburite stone displayed in the Smithsonian Institute of Gem and Mineralogy.

SMCDS BUSINESS MEMBER

Wall of Fame



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Tom O'Brien, CFP®, CLU®, CHFC®
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SMCDS BUSINESS MEMBERS acknowledged on this *Wall of Fame* contribute in meaningful ways* throughout each year of their membership to our society's fiscal health, industry intelligence, and community presence. *Event sponsorships, educational seminars / workshops, table clinics with timely dental industry / small business information, special product offers / pricing discounts, products and services relevant to your professional success and the oral health of our community. BUSINESS MEMBERSHIPS are an important source of non-dues revenue that has helped SMCDS to increase and improve member programs without raising SMCDS dues for more than a decade. We count on Business Members to engage professionally with members - as consultants focused on identifying and fulfilling your needs. In exchange, we encourage you to consider SMCDS BUSINESS MEMBERS as **preferred providers** when in the market for products and services.

Membership Levels: Premier \$5,500 Platinum \$4,000 Gold \$2,900 Silver \$2,100

Dentistry's Changing Workforce Composition and the Age of Digital Transformation – Executive Summary

De-Constructing the Old Model of Practice and Preparing for the Future

Christine Sison, BS, MS

The dust is settling and we are seeing the dental industry re-emerge from the pandemic. Many practices have the desire to take on the pent-up demand, but most are hindered by an ongoing challenge that plagued the industry even prior to COVID. That challenge is the ability to find and retain great team members. Fortunately, in the wake of crisis, opportunities and tools have come to center stage and now viewed in a different light. These are discussed below.

Changing Workforce Composition: The Rise of a Hybrid Model and Fractional Staffing

The pandemic's impact on the workforce was significant. The ability to access childcare options and the immediate shift to remote only options for schools, as well as unemployment were just some of the factors that impacted the industry. Overall, the pandemic exacerbated an already stressed dental staffing environment. As a result, many practices were more open and, in some cases, forced to consider new approaches to fill their staffing needs. One of these models was the use of a hybrid team which allows access to an entirely new pool of talent. By being open to an off-site team, practices can fill talent and skillset gaps, reduce the heavily reliance on local talent and ameliorate disruptions in staffing changes. Off-site teams also allow doctors to utilize a fractional staffing approach to filling positions. Rather than hire a full-time employee, fractional staffing gives doctors the option to contract with someone for that "just right" amount of part-time assistance to complete a task. Use of an off-site team also allows the in-office team to focus on tasks that need to be done in the office, reducing the need to multi-task which often leads to stress, burnout and staff turnover. Companies like Swiss Monkey are offering a fully integrated solution for private practices. Doctors can re-engineer their operations and tap into economies of scale usually reserved for larger corporations.

Emergence of New Tech and the Age of Digital Transformation

We are seeing the Renaissance of new tools come into the dental industry. New tech continues to emerge that can help an office digitize workflows and create more efficient systems. Modern practices will be built around a more robust data architecture, allowing it to deliver better, faster and more personalized experiences. While we are

seeing rapid and exciting progress on the technology front, it will be the **integration** of these tools with one another that will be key to extracting the value they promise to deliver. The challenge for practices will be in how to leverage these tools so they can maximize their value and minimize "technology bloat". Another interesting consequence of hybrid teams and technology is also the democratization of dental practices. The ability to start or run a practice is also heavily dependent on the ability to attract, hire and retain on-site team members. With the ability to leverage off-site teams and the use of technology, offices that may not typically be able to operate, now have the resources to do so.

The Elephant in the Room

There is certain fear that the rise of technology and the growing use of off-site teams will completely replace the front desk team. While that is certainly understandable, that future seems distant at best. In fact, it can be argued that this paradigm shift in practice operations is singularly focused on allowing an on-site team to do their work better and more efficiently. There is no technology that can replace the sense of empathy and trust built between two people, particularly between a provider and patient. In healthcare, fidelity to that principle is paramount. It is what makes our field unique. So, in effect, technology and virtual models will emphasize the need for even better and more honed human interaction. The practice of the future will be built on a robust data architecture integrating data across the practice, use a blend of local and off-site talent, utilize smart technology and have more specialized on-site team members to deliver an even better patient experience. Practices that embrace these new resources will position themselves to prepare for the new generation of healthcare consumers, be better equipped to compete with a rise in DSO-supported offices and create a more durable and profitable practice.



Christine Sison is the CEO of Swiss Monkey, a staffing and virtual front office services company. She has her Bachelors from UC Berkeley and a Master's in Health Policy and Management from the Harvard School of Public Health. ***Want to learn more about a hybrid work model?*** Contact Swiss Monkey at 916-500-4125 or christine@swissmonkey.io.



My Personal Covid Experience

Sylvia C. Tso, DDS
Redwood City, CA

I wanted to share with all of you how Covid changed my life. Some of you probably know of someone that has been exposed to or had Covid. I was also one of those people that would HEAR about Covid experiences until Covid hit both of my parents who live in Las Vegas.

It all began with a phone call in January 2021 from my mom that my dad was hospitalized. He was not feeling well but did not take it seriously. He was diagnosed with pneumonia initially but as a precaution every patient is tested for Covid. He came back positive and my heart dropped. I cancelled all my patients, got a Rapid Covid test to confirm that I was Covid negative and flew out to LV. I packed my face shield, my N95's, surgical masks, gloves, thermometer, pulse oximeter and blood pressure cuff in my carry on. I had no idea what to expect.

When I arrived in LV, my dad was in ICU on heated high flow oxygen (this is the type of oxygen that is given as last resort before a patient is intubated). My mom was still at home and received a Covid positive test the day after I arrived. She was not well and I monitored her oxygen level and it declined gradually. After four days of doing everything I could for her at home, I knew she had to be admitted to the hospital. She did not want to go but I told her that her oxygen level was dangerously low. I was scared but I knew she needed medical attention. I waved to her as the ambulance drove her away. Little did I know that this would be the last time I would see her for a very long time.

With Covid, there were no hospital visits for my dad or my mom, just an occasional zoom or telephone call. My mom speaks limited English and always relied on my dad or me to communicate. I was worried about how she would be able to communicate with the nurses and doctors. I felt helpless and my mom was frustrated. My father was still very critical and was declining.

My father passed away ten days after he was admitted to the hospital. My mom was still critical and now she is on heated high flow oxygen. I could not tell my mom about my dad's passing because I knew she would not fight if

she knew that her husband did not survive Covid. I had to make all the difficult funeral decisions for my dad....on my own.

After 5 weeks of being in three different facilities: hospital, then an acute hospital and finally at a rehabilitation facility, my mom was finally discharged. Once discharged and home it was another 2 weeks of consistent physical and speech therapy before my mom became ambulatory. My mom had to learn how to walk, eat, swallow and use the bathroom all over again. She also had to be slowly weaned off oxygen. I was there every day by her side for the long 7 weeks. My mom was angry and frustrated and did not understand why and how she could get Covid. My parents followed all the precautions and only went out for the necessary groceries. Despite surviving Covid, my mom is still not back to her preCovid condition.

Being a dentist and well educated in infection control, I am convinced that all the precautions I took prevented me from contracting Covid. I tested negative the entire time I was in Las Vegas, despite living in the same household with both Covid positive parents. When my mom was still positive and a patient in the subacute hospital, her room was located under a vent for the Covid Unit. I stood under this vent every day for nine hours a day, until she was moved out of this unit. This was the only way I could see her through her window.

I double masked from the time I got on the airplane to LV as well as the entire time I was in LV (N95 then a surgical mask), 24/7 ALL DAY...I even slept double masked. The only time I removed the masks was to quickly eat and to quickly shower. I SWEAR BY N95 MASKS. I am convinced that all the protocols I took kept me safe and healthy.

Being away from my office for over 7 weeks was beyond stressful. I am thankful for the support from my husband, Keith and my son, Ryan. I am also very grateful for my dedicated employee, Ashley for "holding down the fort" while I was gone as well my colleagues, Dr. Mike Jee, Dr. Greg An and Dr. Greg Ding for taking my emergencies and their valuable support while I was gone. I honestly do not think I could have made it through those two long months with out all of them by my side.

Despite the vaccine and the loosening of the guidelines, I am not letting my guard down. I still double mask despite the vaccinations. After seeing first hand how Covid can change your life, I am not ready to resume to preCovid conditions yet. Wearing a mask is a small price to pay to stay safe and keep those around you safe. I hope those that have not been vaccinated will strongly consider the vaccine. Covid is an evil virus and not worth gambling your life with.

DSO Agreements: How They Differ from Private Practice Agreements

by Ali Oromchian
Dental & Medical Counsel
HR for Health

A difficult decision a new dentist must make is determining whether he or she will go into private practice alone or work with a DSO ("dental support organization" or "dental service organization"). This article discusses DSO agreements and why enlisting the aid of an experienced dental attorney may be helpful in making the right decision.

Level of Authority

In a private practice, dentists typically have a high level of authority over such factors as:

- Team members within the office
- Software used
- Processes implemented (check-in/check-out processes, hygienist tasks, etc.)

In DSO agreements, authority vested in the dentist can vary widely. This manifests in three areas:

- Treatment planning: DSOs may attempt to require non-clinicians handle treatment planning and service recommendations. This is not legal and should be rejected. In other cases, dentists may feel their services are compromised by a DSO's scheduling. In either case, review by an experienced dental attorney prior to signing DSO agreements protects the dentist from potential issues.
- Environment of care: Many DSO agreements give the DSO final say in hiring and firing team members within the practice. This sometimes leads to continuity issues and office personality conflicts. The dentist may not control important business components such as office software and processes.
- Other policies and procedures: DSO-mandated policies may not be compatible with the dentist's personal philosophy, or the dentist may disagree with the implementation of procedures.



It is vital dentists carefully review DSO contracts to determine what their authority in-office would be, and advocate for working conditions they are comfortable with (such as dentist's full authority over all treatment planning).

Compensation and Benefits

A DSO may offer attractive opportunities for dental school graduates struggling with high debt levels. DSOs compensate in different ways; dentists are paid straight salary, or perhaps the dentist receives a portion of collected payments. Certain DSO contracts stipulate dentists receive variable percentages of total revenue he or she generates, partitioned into distinct tiers (\$0 - 25,000 vs. \$25,000 - 35,000, etc.).

Many private practices limit offered benefits in an effort to reduce operational costs. DSOs generally provide rich benefit packages. These could include:

- Paid time off
- Sick leave
- Health insurance
- Other forms of insurance/insurance discounts (vision insurance, life insurance, etc.)

continued on next page

Larger DSOs (with 50 or more full-time employees) must offer health insurance employee benefits, and may be required to offer additional benefits, per federal regulations.

Professional Liability Insurance

Usually, it is ideal for dentist to maintain coverage from their original insurance carrier. Private practices generally allow associates to select their malpractice carriers, but DSOs often assume that responsibility.

The best malpractice carriers are well-funded companies with solid reputations. If the DSO-selected insurer does not meet these criteria, the dentist should request they be allowed to choose their own and seek reimbursement from the practice for the cost of the DSO-preferred provider.

Also, the dentist should carefully examine the DSO contract for indemnification clauses (where the dentist must reimburse, or indemnify, the DSO from personal funds for liability from the dentist's actions). Most experts recommend dentists refuse such terms in the agreement.

Terminating the Agreement

Most private practice agreements provide one-year terms, with options to terminate without cause given sufficient notice (30 to 90 days). Many DSO agreements do not allow associate dentists to terminate without cause and may invoke heavy penalties for quitting early. Dentists with the goal of owning a practice should watch for these contract terms before entering an agreement.

Restrictive Covenants (Non-Compete Agreements)

The force of restrictive covenants varies from state-to-state. Certain "employer-friendly" states like Michigan allow employers to limit former employees' actions with regards to the same profession, in the same area. On the other hand, several states, such as California, Rhode Island, and North Dakota, are considered hostile towards restrictive covenants. California, for instance, prohibits restrictive covenants almost entirely.

Also, potential restrictions on future work are greater with DSOs compared to single-location private practices. Thus, a dentist must determine whether such non-compete agreements are acceptable and become familiar with laws of their state pertaining to restrictive covenants. Again, it is advisable to seek guidance from an attorney who specializes in such contracts prior to signing any agreements.

Partnering with a DSO entails unique benefits and disadvantages. It is vital you educate yourself on potential ramifications of such contracts. You should advocate for yourself, and never accept terms that make you uncomfortable or damage your financial well-being. A reputable DSO should work with you to achieve an acceptable accord.





What could you do with an extra \$5,000 - \$50,000 for your dental practice?

There is a lot of money on the line, and you want to ensure that you are not missing out on the Employee Retention Tax Credit. In December 2020, Congress passed a law that made it possible for your business to be eligible for the Employee Retention Credit (ERC), even if you had already received a PPP Loan. The original rules did not allow business owners to claim the ERC if they had previously taken a PPP loan. There is no reason to wait any longer to claim this credit.

The 2020 Employee Retention Credit is a potential credit of up to **\$5,000 per employee** (8 employees = \$40,000 credit) if certain conditions are met. There is also a 2021 Employee Retention Credit available if your practice is collections is less than 80% per 2021 quarter when compared to the same quarter in 2019 which is worth up to **\$7,000 per employee per quarter!**

The credit only applies to employees that received a W-2 at the end of the year. For sole proprietors, this will only

apply to your employees. For corporations, this will apply to all employees, including the owner (even if the owner is the only employee).

For employers who qualify, including borrowers who took a loan under the initial PPP, the credit can be claimed against 50 percent of qualified wages paid, up to \$10,000 per employee annually for wages paid between March 13 and Dec. 31, 2020.

Qualification is determined by one of two factors for eligible employers — and one of these factors must apply in the calendar quarter the employer wishes to utilize the credit:

1. A trade or business that was fully or partially suspended or had to reduce business hours due to a government order. The credit applies only for the portion of the quarter the business is suspended, not the entire quarter.
2. If gross receipts in a calendar quarter in 2020 are below 50% of gross receipts when compared to the same calendar quarter in 2019, an employer would qualify. They are no longer eligible if in the calendar quarter immediately following their quarter gross receipts exceed 80% compared to the same calendar quarter in 2019.

continued on next page

You must first determine if you qualify. Then you must determine the time-period that you can use for the calculation. Once you have determined the time-period, you can count up to \$10,000 of each employees' gross wages towards the 50% credit.

If there is any period that overlaps with the covered period of your PPP loan, you cannot allocate the same wages for both the Employee Retention Credit and PPP forgiveness. It is recommended that your documentation proves that your practice has not double-dipped with the wages being allocated to PPP Loan Forgiveness.

Most dental practices in California will qualify for this credit. Thomas Doll can provide the necessary documentation to ensure you have full loan forgiveness along with maximizing the Employee Retention Credit.

It is critical to ensure the correct treatment for any time periods that there is overlap with the PPP loan 8 week or 24 week covered period. If you have already received forgiveness on your first PPP loan, you need to be careful about how you approach the Employee Retention Credit calculations, and it is recommended to speak with a qualified CPA to go through the details.

Claiming the ERC will impact the amount that you can deduct as wages on your business tax return. If you have already filed your 2020 tax return and retroactively claim the ERC, you will need to amend your tax returns and decrease the amount of wages deducted on the return by

the amount of the credit that is being claimed. Thomas Doll provides a tax memo to the CPA who prepares your tax returns to ensure that they have the proper documentation needed for the amended tax returns, or if you are on extension, they can make the appropriate adjustments to finalize the return.

The formula to maximize the Employee Retention Credit can be complicated...especially if you also will or have received full PPP loan forgiveness. The wrong moves could cost you THOUSANDS in credits or warrant unnecessary audit risk.

To get on the list for our ERC & PPP Package click the following link to fill out the questionnaire about your practice: <https://thomasdoll.com/sign-up-for-ppp-loan-forgiveness-and-employee-retention-credit-up-to-5000-tax-credit-per-employee/>

As a dental society member, you will receive special discounted client pricing rate for the Thomas Doll ERC & PPP Package, even if you are not a Thomas Doll client!

You can find more about the Employee Retention Credit on the IRS website at:

<https://www.irs.gov/coronavirus/employee-retention-credit>

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Th 8/19	Practice Management	Dentistry's Changing Workforce Composition and The Age of Digital Transformation
6:30-7:30pm LIVE Webinar For staff too!	 Christine Sison Free Member Webinar	Learning Objectives <ul style="list-style-type: none"> •Discuss the rise of the remote workers, the changing workforce composition in dentistry and the use of hybrid models (in-office and off-site) •Discuss a new recruiting mindset for employers •Discuss the impact of new technology and business intelligence tools and what that means for practice operations, the patient experience and staffing •Discuss different future models of dental service delivery and what that could mean for your practice
Tu 9/7	Practice Management	HIPAA Training: Is Your Practice Safe?
6:30-8pm LIVE Webinar 1.5 CE (Core) For staff too!	 Jeff Broudy	Course Description 2020 was an unprecedented year for healthcare providers. Forced to adapt to ever-changing circumstances, practices across the nation scrambled to put together a response plan to ensure compliance with new OSHA and HIPAA guidance. What do you need to do now to protect your practice? <ul style="list-style-type: none"> •Evolving cyber threats, including ransomware attacks •Tips to keep your patients, employees and practice safe and secure •Enforcement trends for HIPAA & OSHA violations •Plus, you will complete your 2021 HIPAA Risk Assessment requirement!
Fr 9/24	Required CE	Infection Control • CA Dental Practice Act • Cal-OSHA Training
8:15a-2:45p LIVE Webinar 6 CE (Core) For staff too!	 Marcella Oster, RDA	Course Description The Dental Board of California requires all licensed dental professionals (DDS, DMD, RDA, RDH, etc.) to take approved CE courses in Infection Control (Bloodborne Pathogen Standards) and California Dental Law every two years for license renewal. Cal-OSHA requires employers to train their workers annually in Bloodborne Pathogens, Hazard Communication, General Safety, Emergency Response, and other standards based on the nature and size of your facility. This convenient one-day course provides you and your staff with 6 units of Core CE packed with practical information.