

NYSDA

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news



Making Compliance a Priority Today May Save Your Practice from OMIG Tomorrow

Think of it as preventative medicine for your practice.

Jennifer Kirschenbaum, J.D.

While it's doubtful that any reader of this article would dispute the benefits of recent advances in technology, the increased ease of maintaining and sorting patient information has also enabled government agencies to modernize oversight tactics. Specifically, new and improved methods of data mining are being utilized to determine where practitioners are overusing services, misrepresenting care provided or flat out billing for services that were not rendered. While historically such inquiries were made predominantly for instances of reported or discovered blatant abuse, new software with the ability to identify questionable billing patterns or unnecessary services has drastically changed the oversight game.

MEDICAID AS DOMINANT PLAYER IN DENTAL COMPLIANCE

The most significant player to emerge for dentists in New York State in the sampling and enforcement role is the Office of the Medicaid Inspector General (OMIG). With its newly formed Dental Fraud Unit, OMIG is not tiptoeing around the fact that its work order today and for years to come is to target dental practices and attempt to recoup monies already paid to them or to

deny monies that would be paid. To that end, in conversations with our firm, OMIG has said its enforcement actions against dental practices are likely to begin the simplest way possible: A list will be tabulated of the dental practices in New York State and OMIG will peer into each practice to make sure it is operating effectively and appropriately.

You may be wondering how OMIG can do this efficiently; the answer is, the groundwork has already been laid. For this preliminary check, OMIG will take your word for it—until information to the contrary arises. However, in order to enforce the presumption that you are operating appropriately, OMIG is now requiring that you take affirmative steps annually to prove that you are.

For dentists not familiar with OMIG, or the process referenced above, pursuant to New York law, certain persons eligible to receive reimbursement from New York State Medicaid are required to have a compliance plan that meets specified criteria and to certify adoption of that compliance plan with Medicaid.¹ Of relevance to

1. New York Codes, Rules and Regulations, Title 18, Part 521.

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Madeline Ginzburg, holding oversized teeth, and other volunteers gather for parade down Malcolm X Boulevard opening Harlem Week Children's Festival.

Harlem Week Celebrates Oral Health

ON A SUNNY WEEKEND in August, under blue canopies erected on the schoolyard outside of P.S. 175, in the Harlem section of New York City, a volunteer cadre of NYSDA dentists, Columbia dental students and Mt. Sinai Hospital residents performed oral health exams on neighborhood children and adults. By the end of the weekend, these dental professionals had screened nearly 500 people.

The event was organized by the New York State Dental Foundation and timed to coincide with New York's annual Harlem Week Children's Festival, a two-day, family-friendly cultural celebration that also features health and educational awareness activities. Madeline Ginzburg, president elect of the Bronx County Dental Society and a member of the NYSDF Board of Trustees, worked with Rep. Charles Rangel, Democrat of New York, to secure a place at the festival for the NYSDA screeners. She further immersed herself in the event, participating—along with other dental volunteers—in a parade down Malcolm X Boulevard and 135th Street to the schoolyard for a ribbon-cutting ceremony. The families who entered the schoolyard behind them received tubes of toothpaste, toothbrushes, coloring books, floss—courtesy of Henry Schein—and, of course, free dental screenings. Patients needing follow-up treatment were referred to local dental components for contacts with nearby dentists.

Components volunteering for the Harlem Week screening included New York County, Bronx County, Second District and Suffolk County Dental societies. ☘

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Making Compliance a Priority *continued from page 1*

dental professionals, the following individuals are required to adopt an effective compliance plan:

“Persons, providers or affiliates who provide care, services or supplies under the medical assistance program or persons who submit claims for care, services, or supplies for or on behalf of another person for which the medical assistance program is or should be reasonably expected by a provider to be a substantial portion of their business operations.”² (Emphasis added.)

The term “substantial portion” of business operations is the key to understanding the broad reach of the compliance plan requirement. The statute offers the following encompassing definition for “substantial portion,” which will be discussed at greater length below.

“(1) when a person, provider or affiliate claims or orders, or has claimed or has ordered, or should be reasonably expected to claim or order at least five hundred thousand dollars (\$500,000) in any consecutive twelve-month period from the medical assistance program;

“(2) when a person, provider or affiliate receives or has received, or should be reasonably expected to receive at least five hundred thousand dollars (\$500,000) in any consecutive twelve-month period directly or indirectly from the medical assistance program; or

“(3) when a person, provider or affiliate who submits or has submitted claims for care, services, or supplies to the medical assistance program on behalf of another person or persons in the aggregate of at least five hundred thousand dollars (\$500,000) in any consecutive twelve-month period.”³

According to the OMIG enrollment office, the \$500,000 precipice in the substantial portion definition section applies to practitioners who receive over \$500,000 of reimbursement from straight Medicaid or any managed care Medicaid plan (Medicaid HMO). The rationale behind incorporating Medicaid HMO monies is that Medicaid funds every managed care Medicaid plan; so even though services are “administered” by the managed care company, reimbursement comes from Medicaid and, therefore, Medicaid has an interest and connection to the funds.

Another important element of the substantial portion definition that deserves highlighting is that Medicaid includes the cost of services ordered by a dentist (just ordered, not actually paid to that practitioner) in the \$500,000 calculation. The ordering element of the substantial portion definition applies to the ordering of any of the following, as well as additional services: dentures, DME, lab work, radiology and home care services.

When taking into consideration the two factors referenced above, that the \$500,000 precipice includes straight Medicaid and Medicaid HMO monies and that the amount of “ordered” services, not just monies

received by a practice are included in the tally, the conclusion that in all likelihood the majority of New York dental practices will fall within Medicaid’s compliance program requirement is hard to miss. If you are one of the many practitioners who qualify as requiring a compliance plan, Medicaid has dubbed you a “required provider.”

OMIG COMPLIANCE REQUIREMENTS

The compliance plan requirement for affected providers did not come without direction. OMIG has specified the areas that required providers’ compliance programs must be applicable to. These are:

1. Billings.
2. Payments.
3. Medical necessity and quality of care.
4. Governance.
5. Mandatory reporting.
6. Credentialing.
7. Other risk areas that are or should with due diligence be identified by the provider.⁴

In addition, a required provider’s compliance program must include the following elements:

1. Written policies and procedures that describe compliance expectations; provide guidance to employees and others on dealing with potential compliance issues; identify how to communicate compliance issues to appropriate compliance personnel; and describe how potential compliance problems are investigated and resolved.
2. Designate an employee vested with responsibility for the day-to-day operation of the compliance program.
3. Provide for compliance training and education of all practice staff.
4. Dictate the proper communication lines to allow compliance issues to be reported (including anonymous and confidential good faith reporting) as they are identified.
5. Set forth disciplinary policies to encourage good faith participation in the compliance program by all affected individuals, including policies that articulate expectations for reporting compliance issues and assist in their resolution and outline sanctions for:
 - a. failing to report suspected problems;
 - b. participating in non-compliant behavior; or
 - c. encouraging, directing, facilitating or permitting either actively or passively non-compliant behavior.
6. Designate a system for routine identification of compliance risk areas specific to dentistry for self-evaluation of such risk areas, including, but not limited to, internal audits and as appropriate, external audits, credentialing of providers and persons associated with providers, mandatory reporting, governance and quality-of-care of medical assistance program beneficiaries.
7. Detail a system for responding to compliance issues as they are raised, such as: responding to compliance problems as identified in the course of self-evaluations and audits; correcting such problems promptly and thoroughly and implementing procedures, policies and systems as necessary to reduce the potential for recurrence; identifying and reporting compliance issues to the department or the Office of Medicaid Inspector General; and refunding overpayments.
8. Provide a policy of non-intimidation and non-retaliation for good faith participation in the compliance program, including, but not limited to,

2. 18 NYCRR § 521.1.

3. 18 NYCRR § 521.2.

4. 18 NYCRR § 521.3.

reporting potential issues, investigating issues, self-evaluations, audits and remedial actions, and reporting to appropriate officials as required by law.⁵

While the elements listed may seem overwhelming, in all likelihood, your practice has some form of procedures, no matter how basic, established for each of the above. The difficulty that arises now is taking the steps to adopt a written compliance program that explicitly covers all of the listed elements. This is not as laborious a process as you may think, so long as you are working with the right healthcare attorney. In creating your compliance program, the appropriate balance must be met between incorporating the needs and intricacies of your practice and the requirements established by OMIG.

OMIG KNOWS

One of the first questions I receive from clients with regard to compliance is, who is going to know if I don't bother to comply? The answer is, OMIG will know, because OMIG is checking. In fact, OMIG does not have to look further than its own database, because required providers are responsible for certifying to OMIG each December that they have adopted and have in place a compliance program that meets OMIG's requirements.⁶ To simplify the process, OMIG has made certification available on its website (www.omig.ny.gov).

Should the commissioner of health or the Medicaid inspector general find that a required provider does not have a satisfactory compliance program,⁷ or no program at all, applicable law states that "the required provider may be subject to any sanctions or penalties permitted by federal or state laws and regulations, including revocation of the provider's agreement to participate in the medical assistance program."⁸ Unfortunately, if you are a required provider, it is not anticipated that should it be discovered that your practice does not have a compliance program, your troubles with OMIG would stop. OMIG has intimated that it will be using the compliance program requirement as a window into practices. Failing to certify that you have a compliance program would be equivalent to allowing your window to have cracks and dirt accumulation, indicating a messy interior with the potential for additional noncompliance.

Should your practice appear on OMIG's radar as a potentially non-compliant practice, you run the risk of being targeted by OMIG for a retrospective review of claims or being placed on prepayment review, which is a process that requires that you send in patient records prior to receiving reimbursement for any services.

Either process—a retrospective review or prepayment review—creates dire ramifications for many practices, requiring legal representation, diminished reimbursement and the potential to have to pay back monies received or anticipated by the practice.

Be advised that should you outsource your billing to a billing company, OMIG has implemented compliance requirements and registration requirements for them as well. Should your billing company fail to comply, our office has received information from OMIG that the billing company may be investigated and be required to identify clients—which may result in you also being looked at by OMIG. If you do work with a billing company, be sure to request proof of compliance with OMIG's requirements.

BENEFITS OF COMPLIANCE

In addition to staying off of OMIG's radar, there are benefits to OMIG's compliance plan requirement that are immediate and rewarding, which is why mandatory compliance can be a good thing.

A few ways you are protecting your practice through compliance are:

1. Identifying Red Flags. Designating in your policy potential red flags that your practice will make an effort to identify during your billing process, not after.
2. Designating Lines of Communication. Your compliance program will also set forth appropriate lines of communication to report compliance issues. Often, employees will cover up mistakes, rational-

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5. Id.

6. 18 NYCRR § 521.3.

7. 18 NYCRR § 521.4.

8. Id.

Stress Reliever

A comprehensive financial plan could be the antidote to your financial stress.

Lewis J. Altfest, PhD, CFA, CFP, CPA

Annual billings are down. Business costs are rising. Financial markets are in flux. Feeling stressed financially? Here's what you should know about taking care of yourself and building your assets.

WHAT IS WEALTH MANAGEMENT?

It's the newest buzzword among financial professionals and the investing public. It's so popular that a Google search of the term wealth management

turns up over two million hits.

- While investment management of stocks and bonds is of central concern, real wealth management takes all your assets, liabilities and financial goals into account.
- You don't have to be wealthy to benefit from sound financial management.
- You're more likely to win the race when all your assets work together.

Simply put: Wealth management is the imple-

mentation of a comprehensive financial plan. And you don't need to drive a Rolls-Royce or own a mansion to benefit from it. If you're making at least \$125,000, own a home (or intend to), and want to plan for your own or your family's future, a comprehensive plan could help you.

A comprehensive financial plan is one that takes all your assets and liabilities into account and is designed to meet your goals—for example, sending three kids to private colleges, retiring by age 62 and passing along your estate with minimal tax. Specifically, a plan should go well beyond investment management—such as choosing the right mutual funds—to include planning in the areas of cash flow management, retirement, tax, education, estate, charitable giving, and insurance and risk management. It should cover as well asset protection, an important issue in planning for dentists. Dentists with ownership stakes in their practices can add business planning to that list.

In addition to portfolio management, your planner should be familiar with tax, insurance and estate planning, and be willing to work with professionals on your behalf in those fields. In fact, coordinating the individual pieces is what separates a good plan from a mediocre one. You can't effectively plan for an early retirement when you don't take into account the cost of health insurance or funding your children's advanced degrees. If you focus on only one facet of your plan, you're likely to subvert your efforts in other areas.

Some dentists have met their annual income goals, but are not saving enough to meet their other goals. It's not uncommon for a dentist to take out a home equity loan to finance a college education, but he or she shouldn't have to.

As an example, one dentist at 45 was pretty happy with his private practice, earning \$130,000 a year. His wife brought in another \$15,000 working part time. They lived a moderately comfortable lifestyle—drove Volvos, took several vacations each year and dined out frequently. They also had two children they planned to send to private colleges. They thought they'd been saving enough to retire at age 62. Analyzing their assets and liabilities, it became obvious they would not meet their goals and maintain their lifestyle in retirement if they continued on their current path. They would have to make up for the anticipated \$9,000 per year shortfall in their savings sched-



New Life for Old Instruments

The Marines are looking for a lot of good dental instruments.

ule. They'd either have to cut back on their spending, retire later or increase their income. His advisors worked with him to restructure his investments accordingly, and through a combination of greater attention to savings and a modest extension in working years, he's back on track for a comfortable retirement without significant sacrifice.

CHOOSE THE RIGHT WEALTH MANAGER

Be sure you are completely comfortable with any potential adviser. You'll be sharing your dreams and desires for your future with this individual, and it is imperative that you can freely discuss all your goals without feeling awkward. Find out whether your wealth manager is simply a broker/dealer who will only sell you stocks or other investment products, without managing the rest of your plan. Also, different wealth managers work with people of different asset levels, so you can find the one who is the right fit for you. And, again, be sure the one you pick is willing to consult with your other professionals (accountant, lawyer, etc.) if need be.

Finally, be sure you understand your adviser's fee structure. Wealth managers use a variety of billing methods, ranging from hourly rates, to a percentage of assets managed, to flat fees. A fee-only wealth manager gets paid not through sales commissions but only by his clients, making it easier to focus on their best interests. Make sure your adviser meets with you at least annually after the initial implementation of the plan and that you get quarterly investment statements.

If you are happy with your adviser, convey your thanks. It will make him or her feel good—just as a patient's gratitude makes you feel good about your work as a dentist. ☘

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SEND YOUR OLD dental instruments to war! That's the battle cry of Peter Zegarelli, D.D.S., of Tarrytown, who's on a mission to collect instruments, such as explorers, scalers, curettes and amalgam carvers, to ship to marines in Afghanistan. While these instruments may have outlived their usefulness in the dental office, they are desperately needed in the war zone to clean dust and sand from weapons.

Dr. Zegarelli's quest was prompted by a request from his 24-year-old son, James, a 1st Lieutenant with the Marine Corps, who commands a rifle platoon in Afghanistan. James, an Officer Candidates School graduate of Colgate

University, has been in Afghanistan for the past three to four months and is slated to return to the states in January. Needless to say, his father is anxious to support his son however he can, including offering to collect dental instruments from his colleagues across the state—he realizes he could be overwhelmed with contributions, but he's confident he can find outlets for them.

If you would like to help in this cause, Dr. Zegarelli is accepting donations at his office: 87 North Broadway, Tarrytown, NY 10591. He can be reached at (914) 631-1800, or by writing to pjzegarelli@aol.com (put Marine Dental Instruments in the subject line). ☘

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New York State Dental Professionals During Past Decade

Latest Census figures show in the past decade there has been a modest increase in number of people living in New York State and mixed results in number of dental professionals in the state.

H. Barry Waldman, D.D.S., M.P.H., Ph.D.; Debra A. Cinotti, D.D.S.

A study of New York State county populations and dental personnel during the mid-years of the last decade indicated that the upstate areas of the state were experiencing a "...shortfall in dental professionals."¹ Recent reports from the 2010 Census and the New York State Office of the Professions provide an opportunity to revisit the changes in the general population and dental professionals within state counties through the entire last decade and the

"official end" of the last recession (which lasted from December 2007 to June 2009²).^{3,5}

POPULATION NUMBERS

In the decade between the 2000 and 2010 Census, the total state population increased by approximately 400,000 residents (from 18.9 million to 19.3 million individuals). During the five-year period between 2000 and 2005, there had been a decrease in the number of residents of 27 of the 55 upstate counties

in New York State (i.e., excluding New York City counties and Long Island [Nassau and Suffolk counties], all of which experienced an increase of population during the decade). However, in the second half of the decade, there were changes in upstate county population numbers. As a result, overall, between 2000 and 2010, 17 of the upstate counties experienced a decrease in resident population numbers.⁽¹⁾ In addition, one county (Columbia County) showed no change in its population (an "increase" of two residents out of a total of more than 63,000 residents).

DENTIST NUMBERS

New Licenses

Between 2001 and 2006, there was an increase in the number of new New York State licenses issued for dental practice, starting from 581 in 2001 and 490 in 2002. The number increased dramatically to over 700 new licenses issued in each of the following years with a high of 765 new licenses issued in 2006. Only 400 to 500 new licenses were issued in the following three years.⁴

Total Number

The total number of New York State-licensed dentists increased between 2000 and 2006, from 14,848 to 15,269 individuals, then decreased to 14,946 in 2010⁽²⁾ (Table 1).

Between 2000 and 2010, there was an overall decrease in the number of registered dentists in 23 counties, including three counties in New York City. The greatest number of decreases occurred in the counties of Queens (-118) Bronx (- 50), Erie (- 48) and Suffolk (- 44). The greatest numbers of increases were in the counties of New York (Manhattan) (249), Nassau (49) and Saratoga (41) (Table 1).

(1) Allegany, Cattaraugus, Cayuga, Chautauqua, Chemung, Chenango, Delaware, Erie, Genesee, Hamilton, Niagara, Oneida, Orleans, Oswego, Schuyler, Tioga and Wyoming counties.

(2) Throughout this review, "the (total number of dentists and) county location reflects the licensee's primary mailing address on record with the Office of the Professions; the address is not necessarily the licensee's practice address. Although licensees must be registered to use the professional title or to practice within New York State, being registered does not mean the licensee is actively doing so."⁴ The total number of registered dentists, dental hygienists and certified dental assistants used in this review does not include the numbers of individuals who are registered but are not located in the state (2,856 dentists, 1,235 dental hygienists and 28 certified dental assistants).⁴

Population per Dentist

Reflecting the changes in population and the number of dentists, during the past decade the population per dentist decreased in 33 counties, including two counties in New York City. The decrease in the population per dentist ranged to more than 600 residents per dentist in Otsego County, more than 700 residents per dentist in Schuyler County and more than 800 residents per dentist in Franklin County. By contrast, there were increases by more than 1,100 residents per dentist in Tioga, Washington and Yates counties. One county (Hamilton) no longer has a dentist.

It's worth noting that no discussion of dentist-to-population ratios would be complete without attention to the fact that, "The number of dentists working part time is increasing ..." Studies in the first half of the last decade indicated that "... female dentists younger than 40 years (are) at least five-times more likely to work part time than their male counterparts (5.6 percent vs. 31.3 percent) ... As the number of female dentists increases, their impact on the dental workforce will be significant..." More recent is the report that female and male dentists provide a similar range of services and earn an equal income per patient treated and per day worked. "However, women worked fewer days per year than did men, irrespective of age. If the dental work force and practice patterns remain unchanged otherwise, the total number of patients treated per dentist will decrease slightly as women make up an increasing proportion of dentists."

DENTAL HYGIENISTS

There are almost 9,000 dental hygienists registered in the state; 36% of them are concentrated in four counties: Erie (814), Monroe (680), Nassau (775) and Suffolk (936). For the most part, the counties with the greatest numbers of dental hygienists are those with the largest number of dentists in the county. One notable exception is New York (Manhattan) County, which has the greatest number of registered dentists (almost 2,500) but 256 dental hygienists.

CERTIFIED DENTAL ASSISTANTS

There are almost 1,000 registered certified dental assistants in the state. Twenty-four percent of them are located in two counties: Erie (135) and Monroe (104). Once again, New York County stands out with the most registered dentists but only nine certified dental assistants.

THE CHALLENGE

The often-quoted axiom in real estate appraisals, "It all depends on three criteria, location, location, location," is valuable when considering the selection and retention of a practice location. Undoubtedly, the choice of a practice setting is highly complex and dependent upon a host of objective and subjective criteria, ranging from economics, to family needs and desires, competition and beyond. An appreciation of the evolving economics of a community, population-to-practitioner ratios, numbers of dentist, etc., is an essential factor.

In addition, it is too soon to evaluate fully the immediate and long-term consequences of the past recession (in the second half of the past decade) and its continuing impact on the many aspects of community and individual lives, including the use of dental services.

Nevertheless, maintaining an ongoing account of dental professionals in the various regions of the state is a critical component of any effort to plan and provide for future needs and demands for care.

TABLE 1

New York City and State: Number of Dentists and Population per Dentist by County: 2,000, 2006, 2010 ³⁻⁵

	Number Dentists		Number Dentists		Population per Dentist	
		Change	Change		2000-2010	
	2000	2000-2006	2000-2010	2010	Number	
New York City						
Bronx	404	- 19	- 50	354	3,912	413
Kings	1,315	42	- 5	1,310	1,911	- 36
New York	2,224	260	249	2,473	641	50
Queens	1,672	5	- 118	1,549	1,440	100
Richmond	345	18	17	362	1,294	- 8
Totals						
New York City	5,955	306	93	6,048	1,344	- 8
Rest of State	8,893	115	5	8,898	1,233	26
New York State	14,848	421	98	14,946	1,278	18

The challenge is to develop innovative delivery modalities to ensure this care in a period of uncertain economic realities, which may reflect on the growth or decline of populations in our communities and the accompanying number of dental professionals who will choose to live and practice in these locations. ❧

Dr. Waldman is distinguished teaching professor in the Department of General Dentistry at Stony Brook University School of Dental Medicine. Dr. Cinotti is associate professor in the Department of General Dentistry and director of the general dentistry residency program at Stony Brook University School of Dental Medicine.

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Why Your Dental Office Needs an Automated External Defibrillator

Kay K. Lall, M.B.A.

DENTISTS ARE SEEING an increasing number of elderly patients, which means the likelihood of an emergency is much greater, including sudden cardiac arrest. In such a critical situation, an automated external defibrillator can be the difference between life and death.

It's now law in New York State. Effective Jan. 1, all dental facilities must have an automated external defibrillator (AED) in their offices. This public health legisla-

tion, supported by NYSDA, ensures that the dental community is protecting the health and well-being of its patients by placing an AED in offices so a patient can be treated promptly if he or she goes into a sudden cardiac arrest (SCA).

SCA is a leading cause of death in the United States, responsible for the deaths of over 250,000 Americans every year. The American Heart Association estimates that up to 50,000 of these deaths could have been prevented if someone had initiated the "cardiac chain of survival" immediately at the time of the emergency and if an AED had been available.

An AED is a portable medical device designed to treat SCA. This electronic marvel is smaller than a laptop and consists of a microprocessor that is capable of analyzing the heart's rhythm through a pair of electrodes. When these electrodes are attached to the patient's body, the AED can diagnose the cardiac arrhythmia of ventricular fibrillation and ventricular tachycardia and can deliver an electrical shock automatically to the heart to restore the heart's normal rhythm. AEDs provide auditory and visual prompts to assist the operator in treating an SCA victim.

SCA causes the heart's normal heart rhythm to suddenly become chaotic. The heart can no longer pump blood effectively and the victim collapses, stops breathing, becomes unresponsive and has no detectable pulse. It is important to understand that though SCA and the heart attack (myocardial infarction) both relate to the heart, they are two different problems. Simply put, SCA is an electrical problem, while a heart attack is a "plumbing" problem. Sometimes, a heart attack, which may not be fatal in itself, can trigger SCA. In such a case, AED accessibility is the most important factor in saving a life.

Statistics show SCA can happen to anyone, anytime, anywhere—even in a dentist's chair. According to an article in the Wall Street Journal, men at age 40 in the U.S. have a one-in-eight chance of suffering SCA over the rest of their lives, a stark indication of the toll cardiovascular disease exacts on society. Although the risk of SCA increases with age and in people with heart problems, a large percentage of the victims are people with no known risk factors. SCA strikes people of all ages and fitness levels, including children, usually without warning.

Because of an aging population in this country, dentists are seeing an increasing number of elderly patients, which means the likelihood of an emergency, including an SCA, is much greater. In a critical situation like SCA, an AED can make the difference between life and death. It's imperative that every dentist have an AED on his or her premises, know the symptoms of SCA and have training in basic life support. The 2010 American Heart Association Guidelines stress the importance of high-quality CPR and the availability of an AED to help improve outcomes in a cardiac arrest.

While waiting for emergency help, every minute counts. According to the Heart Association, "Brain death and permanent death start to occur in just 4 to 6 minutes after someone experiences cardiac arrest." Properly performed CPR can maintain the needed blood flow to the brain for some time. But the fact is, to eliminate the heart's chaotic rhythm that caused the SCA, you need an AED on hand. Period. AED is a lifesaving device and very easy to use. The defibrillators have become so sophisticated that they can be used by practically anyone who has been shown what to do. And an AED is the only device that is always ready, always there when needed in an SCA emergency.

There are several reputed companies who manufacture semi-automatic and automatic defibrillator models. But the mode of operation is basically the same: deliver correct lifesaving electric shock to the heart, that is, defibrillation, the only treatment proven to restore a normal heart rhythm.

As the exclusive NYSDA-approved/endorsed AED and AED services supplier, AED Professionals offers the FDA-approved defibrillators listed at the top of this page at a substantial discount. In addition, AED Professionals provides NYSDA members with all the necessary forms to claim a New York State tax credit of \$500 for each unit purchased. Visit AED Professionals at www.aedprofessionals.com/nysda.html. See our ad on this page for password. ☞

Kay K. Lall is founder and CEO/chairman of General Medical Devices, Inc. Before establishing her company, in Palatine, IL, she was an executive with a Fortune 500 company and worked with Westinghouse Electric Corp. on a high level radioactive waste disposal project for U.S. DOE.

AED Brands and Features Comparison Chart

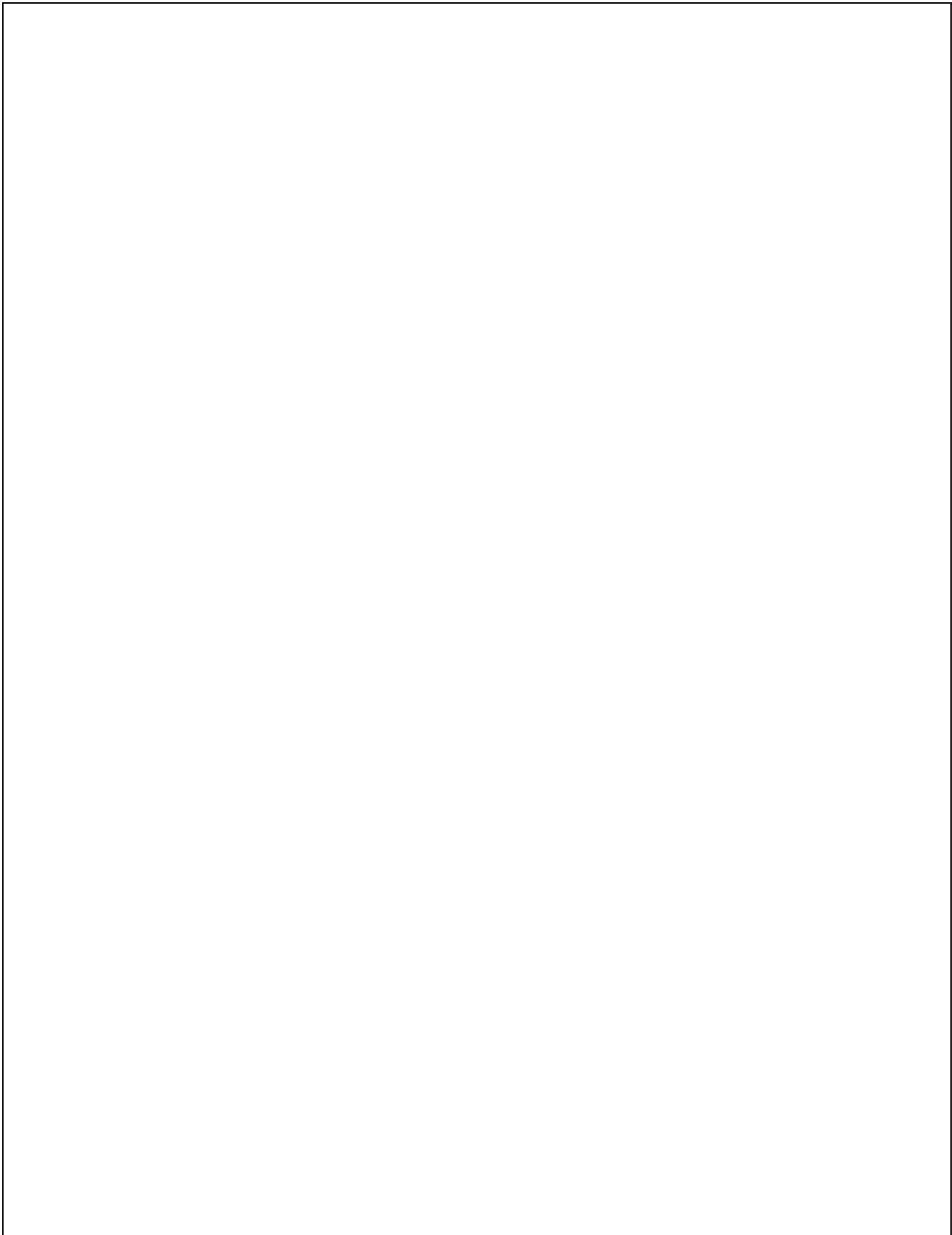
Manufacturers	Defibtech Lifeline	Samaritan PAD AED	Zoll AED Plus	Physio-Control LIFEPAK CR Plus AED
AED Warranty	5 Years	10 Years	5 Years	8 Years
AED Battery Life	(1)	(2)	(3)	(4)
Adult Pads Life	2 years	3.5 years*	2 years	2 years
Child Pads Life	2 years	3.5 years*	2 years	2 years
AED Shock Tech	Biphasic	Biphasic	Biphasic	Biphasic

(1) AED battery life is five years.

(2) Each Pak is rated for 3.5 years of use from date of manufacture (*pad and battery is an integrated unit for the AED).

(3) CPR-D•padz: A unique one-piece design aids easy placement on the chest and provides real CPR. Help on depth and rate of CPR chest compressions. The CPR-D padz also lasts five years—the longest shelf life of any electrode sold today.

(4) Synchronized replacement of the electrodes and battery CHARGE-PAK can cut your maintenance burden in half.



Prosites center spread

Prosites center spread



MEET AND GREET

NYSDA President Elect P. Deborah Weisfuse was guest speaker at this year's Welcome Reception at Columbia University College of Dental Medicine Sept. 8 in the CUMC Faculty Club. The annual event is open to students and faculty. Seen at reception are, from left, Jacob Mann, 2012 student government president; Dr. Weisfuse, former CDM professor; Stephen Boss, 2013 CDM ASDA Governing Board President; Martin Davis, CDM alumnus and senior associate dean for student and alumni affairs.



NYSDF Reaches out to Help Storm Victims

THE NEW YORK STATE Dental Foundation has partnered with Crest/OralB to deliver oral health care supplies to New York State communities most affected by Hurricane Irene. "We have already received two shipments," Foundation Executive Director Laura Leon said, "the contents of which have been sent to Windham, Prattsville, Waterford and Schoharie."

To date, the Foundation and Crest/OralB have distributed 942 pediatric toothbrushes, 1,008 adult toothbrushes, 2,112 tubes of toothpaste and 936 containers of floss.

NYSDA component societies located in areas where excessive flooding resulted in the loss of many homes and businesses have been notified of this program and are encouraged to refer individuals who could benefit from the oral health care supplies.

"Americans tend to be very generous in offering assistance in such times," Ms. Leon said, "but often in cases of natural disaster, what displaced families might need desperately are things we take for granted—clean water, for instance, laundry detergent and a place to wash one's clothes, and, of course, the very tools we use every day to maintain good oral health." Recipients of the supplies reported not having been able to brush their teeth in days, some for up to a week.

Anyone interested in donating supplies to this cause is asked to call the foundation at 1 (800) 255-2100 and ask for Carley Libertucci. ☘

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For more information about this and other Endorsed Programs call: 800-255-2100



Only Winners at 2011 Saratoga Oral Cancer Screenings

Perfect weather, nearly two dozen volunteers and the beautiful Saratoga Race Course were the trifecta for a successful oral cancer screening. The annual event featured 21 dentists, representing six component societies from around the state.

The screenings, held in front of the colorful windows of the Jockey Silks Room, were an effort to remind those in attendance of the importance of routine dental exams and oral cancer awareness.

The screenings have been held annually at the historic thoroughbred track since 2003. Hundreds of people have been screened over the years, and each year, individuals with suspicious lesions have been identified.

While this year's installment featured many familiar faces, there were also quite a few first-time participants, including several members of the NYSDA Council on Membership and Communications and New Dentist Committee.

"This was a great experience for me and the other volunteers," said Maria Maranga, president of Suffolk County Dental Society and Council on Membership and Communications Vice Chair. "I hope we can build on this and get even more volunteers involved both at Saratoga and at future events around the state."

Adding to the mix of new faces, four dental residents from Ellis Hospital in Schenectady volunteered at the day's event. They were accompanied by Fred Wetzel, NYSDA Trustee and new director of the Ellis Hospital Dental Residency program.

NYSDA, along with Nassau County, Fourth and Third District Dental societies, sponsored this year's event, with additional sponsorship coming from OralCDx.

NYSDA member and New Dentist Committee Chair Kendra Zappia donated two Sonicare electric toothbrushes as raffle prizes.

As in years past, NYSDA and the Fourth District donated over 100 oral care kits to B.E.S.T., the Backstretch Employees Support Team. The organization provides a full range of health and human services to support workers in the barn areas at New York's racetracks.

There was a new element to this year's event. Immediately following the screenings, volunteers gathered at the Horseshoe Inn and Tavern for drinks and appetizers. This provided an opportunity for volunteers to meet peers from other parts of the state and relax after a long day of oral cancer screenings. The social gathering was sponsored by event sponsors.

NYSDA thanks the following volunteers:

Kendra Zappia (Third District), Seth Farren (Third District), Hemali Ajmera (Queens County), Chris Salierno (Suffolk County), Robert

and Bonye Trager (Nassau County), May Hwang (Fourth District), Richard Dunham (Fourth District), Fred Wetzel (Third District), Jamie Cohn (resident), Vera Popova (resident), Katelyn Page (resident), Molly Barrett (resident), Mike Breault (Third District), Maria Maranga (Suffolk County), Sujata Prasad (Nassau County), Ted Gialanella (Third District), Josh Poupore (NYSDA), Amie Cheeney (NYSDA), Nancy Hess (Fourth District), Jim Garnett (Nassau County), Patty Marcucia (NYSDA), Jennifer Kluth (Fourth District), Sat Kartar Khalsa (Third District), Richard Klockowski (Fifth District), Rhona Stanley (Third District), Stephanie Peterson (Third District), Jessica Rafferty (NSYDA), Tina Memos, Mr. and Mrs. Jack Fox, Paul Leary (Suffolk County). ❧



Robert Trager, Nassau County, examines racing enthusiast for suspicious lesions during annual oral cancer screening at Saratoga Race Course.



Leon Klempner with one of his young success stories, an infant whose cleft lip was surgically repaired.

Children's Rescue Fund Devoted to Making Kids Smile

WHAT'S THE PRICE OF A SMILE? For Saline, a 10-year-old who lives in Kenya, restoring her smile will cost from \$15,000 to \$20,000. That's because Saline was born with a bilateral cleft lip and palate and will require at least three surgeries, including a graft, to reconstruct her face.

Saline might be filed away as a "hopeless case," if not for Leon Klempner, a Long Island orthodontist, whose life's mission is to give smiles to the hopeless. Klempner has established an organization to provide funding to children born

with severe facial and craniofacial deformities—the difficult cases, like Saline, who cannot be helped by their families, governmental agencies and currently established charitable organizations. He calls it Smile Rescue Fund for Kids and his first beneficiary, when he has enough money, will be Saline.

Saline's condition is complicated by a diagnosis of noma, bacteria that destroys facial tissue. She has been turned away from other charitable organizations, whose resources are limited to helping children who are not so severely afflicted. Without the support of Klempner's fund, Saline's outlook is dismal. In a recent interview with a Long Island newspaper reporter, Klempner said he has seen older people who were never treated for the deformity and they are difficult to understand, have no social or romantic life and no ability to earn an income. The embarrassment and ridicule these people live with is "overwhelming," he said.

Klempner's interest in what happens to Saline and others similarly afflicted is far from casual. He's been overseas 12 times as a volunteer to help children born with cleft lips and palates, most recently in February 2010, when he traveled to Nairobi, Kenya, with a group from Stony Brook University Medical Center. He has been honored an equal number of times by the ADA for his involvement in foreign dental missions.

Smile Rescue Fund for Kids is a nonprofit organization devoted solely to children who have no other opportunities, Klempner said. It will raise money for these children one at a time, starting with Saline. So far, the fund, which is being managed by Klempner's oldest daughter, Amy Epstein, has raised roughly \$7,000 toward the \$15,000 to \$20,000 goal. Donations, which are tax-deductible, may be made through PayPal by visiting www.smilerescuefund.org, or by writing a check payable to the Smile Rescue Fund and sending it to P.O. Box 766 in East Setauket, 11733. Every penny will go to helping Saline, Klempner said. ☘

Today is another day of suffering for thousands of people who are disabled, elderly or medically at-risk with seriously neglected dental disease.

You Can Make the Difference.

Harry had a heart attack, lost his job and exhausted his unemployment benefits. His family is trying to help cover his living expenses, but no money is available for dental care. Today, Harry has a healthy smile thanks to New York dentists, Dr. Steve Kalt, of Hicksville, and Dr. James Dolin, a Massapequa Park oral surgeon, both volunteers for Donated Dental Services (DDS).

You treat the patient. DDS does everything else.

Volunteering is easy. You review patient profiles in advance, choose to see or decline any patient and determine your own treatment plan. You see patients in your own office, never pay lab costs and the program requires no extra paperwork from your staff.

**Easy for dentists.
Lifesaving for patients.
Try one case...**

Harry and Dr. Steve Kalt

Donated Dental Services (DDS)
A Program of
Dental Lifeline Network

To volunteer, visit www.dentallifeline.org,
or call (212) 598-9000
NYC and Long Island
(516) 448-0706 Remainder of State

A Night out on the Ice

HOCKEY PLAYERS have always had a close relationship with their dentists. Join the NYSDA New Dentist Committee and Nassau County Dental Society and help keep that relationship strong.

On Nov. 19, when the New York Islanders take on the defending Stanley Cup Champion Boston Bruins, dental volunteers will be in the Nassau Coliseum for Oral Health Awareness Night, to promote the importance of oral health to the expected 14,000 fans, and to enjoy an evening out with colleagues.

Organizers invite all NYSDA members to attend, to enjoy a pregame reception, discounted game tickets, discounted accommodations at the Long Island Marriot, and video board recognition for all volunteers.

Visit www.nysdental.org or the New York New Dentists Facebook group for more details. ☘

Martin Rubin, NYSDA Consultant, Dies



Martin Rubin

The New York State Dental Association reports with sadness the passing of its friend and colleague Martin A. Rubin, D.D.S. Marty, as he was called, died Sept. 6 in Albany after a brief illness. He was 83. Following his death, he was returned to his hometown of Watertown, Jefferson County, for burial.

Marty came to NYSDA in 1994 after a distinguished 14-year career as executive secretary of the State Board for Dentistry. His initial appointment was as assistant executive director, with oversight of the councils on Education and Dental Practice. More recently, he was the Association's Chief Dental Consultant for Legal Affairs. In both capacities, he also served as NYSDA's in-house expert, responding to member queries about all manner of dental issues.

A 1955 graduate of the University of Buffalo School of Dentistry, Marty practiced dentistry in Watertown from 1956 until 1980, when he moved to Albany to take the state board position. During the time he was practicing, he was active in the Jefferson County and Fifth District Dental societies, serving as president of both organizations, and in NYSDA. He was a member of the NYSDA Board of Governors and chaired the Council on Dental Care Programs, the Committee on Constitution and Bylaws and Reference Committee on Dental Care Programs and Dental Health. He was also a longtime member of the Northern New York Dental Study Group, serving two terms as the group's executive director.

What's not so well known about Marty is that he was classically trained as an oboe and bassoon player and played professionally with the symphony orchestras of Hamilton and St. Catherine, Ontario, throughout his undergraduate and dental studies. He also excelled as a jazz saxophonist and clarinet player during his time with the Army Air Corps at the conclusion of WW II. And he was a model enthusiast who built miniature model trains completely by hand, as well as an accomplished fly fisherman—it is said that when he was out on the water, the local professional fishing guides shadowed him, certain he would lead them to where the fish were.

Marty is survived by Elle, his wife of 60 years, their twin sons Michael of East Setauket and Jay of Jericho VT,

four grandchildren and a brother, Daniel, of Portola Valley, CA. Condolences can be sent to Elle at 100 White Pine Drive, #225, Albany, NY 12203. Contributions in Marty's memory can be made to the Degel Israel Synagogue, 557 Thompson Boulevard, Watertown, NY 13602, or the Mohawk and Hudson River Humane Society, 3 Oakland Ave., Menands, NY 12204. ☘



Anthony DiMango, recipient of service medal from Lutheran HealthCare, is flanked by well-wishers, from left: Neal Demby, senior vice president of dental medicine at Lutheran Medical Center; Dr. DiMango and wife, Mafalda; Edward Vigne, ADA Trustee from Michigan.

Anthony DiMango *Honored for Service*

Anthony L. DiMango, D.D.S., active for many years in NYSDA and the ADA, was honored earlier this year by Lutheran HealthCare, Brooklyn, for his more than 50 years of service. Dr. DiMango, recipient of the center's Sister Elisabeth Fedde Medal of Service, was cited in particular for his work with the Lutheran Medical Center Department of Dental Medicine, where he served as chief of dentistry and chief of oral surgery and helped to train hundreds of residents.

Dr. DiMango was ADA First Vice-President in 1996. He is a past president of the Second District Dental Society, a former NYSDA Governor and longtime member of the NYSDA Council on Governmental Affairs. He has served as ADA Delegate and Alternate Delegate, chaired the ADA Council on Annual Sessions and International

Relations, and was instrumental in development of the ADA Health Volunteers Overseas Program.

A graduate of Georgetown University School of Dentistry, Dr. DiMango received his training in oral and maxillofacial surgery from King's County Hospital and at NYU School of Dentistry. He had a private practice in Bay Ridge, Brooklyn. Dr. DiMango is a 2002 recipient of the NYSDA Distinguished Service Award, and in 1996, he received the Honor Plaque presented by the New York State Chapter of the Pierre Fauchard Academy. ☘

Lifeline Needed

THE NYSDA Donated Dental Services (DDS) program, now in its fourth year, has donated over \$3 million worth of comprehensive treatment for 956 people. Currently, there are 617 volunteers participating in the DDS program, or, four percent of the active private practitioners in New York State. The need for more volunteers remains high, particularly now, during the nationwide economic downturn, which has only increased the number of vulnerable people waiting for care.

DDS was created to help citizens with disabilities, the elderly or medically at-risk who have no other access to dental care. The New York program is similar to 39 other programs developed by Dental Lifeline Network. For more information about DDS and to volunteer, call (518) 449-0706 or (877) 447-0706, or visit www.dentallifeline.org. ☘

CLASSIFIEDS

FOR SALE

LONG ISLAND: Dix Hills. Retiring general dentist with well-established practice selling both practice and luxurious home. State-of-the-art office, fully computerized, digital X-rays and laser. Please call (631) 491-3232; or e-mail: howard_leemon@yahoo.com.

JAMAICA, QUEENS: 22-year-old general practice for sale due to retirement. Modern, 10-room, 3-operator office. \$350K, plus lower overhead. 25-hour week. No managed care. High, active patient volume. Call (718) 740-9500.

CLIFTON PARK: Periodontal practice for sale with second satellite location. Clean, modern, with total of 5 operatories for both locations. Digital X-rays, panoramic machine, computer management package. Strong hygiene. Practice's first-year collections for 2 days/week were \$395k. Priced for fast sale at \$325k. Excellent satellite or start-up practice for ambitious periodontist with tremendous target area. Serious qualified buyers only. Contact: perfectgums@gmail.com.

SCARSDALE: Home/office for sale. 12-year-old, center hall colonial. Three bedrooms, 3.5 baths, full workshop, heated/air-conditioned garage. Office has 2 ops, waiting room, reception area, lab, dark room. Exterior parking for 5 cars. Please call (914) 713-4867. Details on <http://www.web.mac.com/cgac1>.

ALBANY: Do you want a start-up but don't want the hassles of building a beautiful office? This one is done for you. Beautiful, modern 1,250 sq. ft., 3 operatories (2 equipped). Great location. Rent \$1,283/month. Asking \$149k. E-mail: niceteeth2012@gmail.com.

ORANGE COUNTY: Established, active practice in medical building. Willing to stay during transition. Busy office. Reasonable offers considered. One hour from NYC. Great opportunity. Call (845) 783-4426.

CENTRAL NEW YORK: Practice for sale with 4 ops in 1,800 square feet. Located in highly desirable area south of Syracuse. Gross receipts over \$700k in previous years. For more details on this excellent practice, please call Marty Hare at (315) 263-1313.

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Wyoming County - \$800k/year, 5 ops, digital, etc. SOLD.

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Rochester - 3 to 4 ops, \$400k/year part-time, digital, condo available for purchase too!

Elmira - 4 ops, \$425k/year with <50% overhead!

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ONONDAGA COUNTY: Practice for sale. Well-established, 1500 square feet, 4 ops. Beautiful state-of-the-art. Real estate available. Revenue \$465k. Contact Donna at (800) 988-5674. Visit: www.snydergroup.net.

BRADFORD COUNTY, PA: Bordering NY State. 2,700 square feet, 4 ops, digital. Doctor retiring. Revenue \$365k. Contact Donna at (800) 988-5674. Visit: www.snydergroup.net.

NEW PALTZ: Professional office building in prime location. Large parking lot, garage, central air, 2 lavatories. Formerly retired dentist's office; easily converted to other professional use. Call Connie Wassmann, Century 21 Venables, at (845) 742-6562; or e-mail: conniewassmann@yahoo.com.

FREEPORT: General practice for sale. Excellent location. Modern practice with 3 operatories, 2 fully equipped. Please call (516) 250-2828.

MARYLAND, DC, VIRGINIA SALES: No buyer's fees. Maryland - near the water, grossing \$700K, FFS; Bayside - 4 ops, grossing \$500K with building; Delmarva - grossing \$400K, 2 offices, buy one or both. Southern Maryland - 6 ops, grossing \$1M. Contact Polcari Associates Ltd. (800) 544-1297. Visit online at: www.policariassociates.com.

NORTHEAST PENNSYLVANIA: Well-established practice with over 2,000 active patients. 4 days/wk. No HMO. Digital, laser, Panorex. Call Donna Costa at (800) 988-5674. Visit: www.snydergroup.net

MORRIS COUNTY, NJ: Well-established for sale. 6 ops, leased space, digital. FFS. Revenue \$1.6M. Great, great, great! Call Donna at (800) 988-5674. Visit: www.snydergroup.net.

BUYERS/ASSOCIATES: Practice opportunities for sale and to associate. No fees charged to the buyer. For details, call National Practice Transition Network at (877) 365-6786 (NPTN), or register online: www.nptnetwork.com.

MANHATTAN: Office for sale with practice or without. 4-treatment room dental office with long lease. Great central location, across from Carnegie Hall. Easy access to trains, buses, cabs, parking. 24-hour access in professional section of building. Many amenities: window views, large staff room, nitrous oxide, laboratory, dark room, panoramic X-ray, two entrances, two lavatories. Any arrangement will be considered. Call (212) 956-7777 or (718) 549-1570; or e-mail: xpo93@aol.com.

FOR RENT

MIDTOWN EAST: Spacious 2 operatories with/without staff available for GP or specialist. Private elevator, office and lab on premises. Full- or part-time arrangements available. Please contact: 964dental@gmail.com.

MIDTOWN: Operatories for rent in Midtown Manhattan on Madison Avenue. Fully equipped, beautiful office. For more information, call (212) 953-1544; or e-mail: DrSteveFox@aol.com.

MIDTOWN MANHATTAN: Beautiful, new, large-windowed dental operator for rent. Pelton Crane equipment, massage chairs, private office, front desk space, doorman, warm environment. Best location: 46th Street and Madison Avenue. Please call (212) 371-1999; or e-mail: Karenjtj@aol.com.

MANHATTAN-WALL STREET: State-of-the-art new dental office with 2 ops. Private practice, FFS. Specialists welcome and/or general dentist with own patient base. Please call Marilyn at (212) 344-9317; or e-mail: drchillura@aol.com.

MANHATTAN: East 60's sublet. 1-2 chairs available in newly built, high-quality perio office. Looking for quality specialist to join our office. Details, days and hours flexible. Call (212) 838-1592; or e-mail: d.lefton@parkaveperio.com.

MANHATTAN: Operatories available in 4-treatment room office. Great central location, across from Carnegie Hall. Easy access to trains, buses, cabs, parking, 24-hour access in professional section of building. Office has many amenities, including large staff room, nitrous oxide, laboratory, dark room, panoramic X-ray, two entrances, two lavatories. All reasonable arrangements considered. Call (212) 956-7777, (718) 549-1570; or e-mail: xpo93@aol.com.

MIDTOWN MANHATTAN: Full-time or part-time op(s) rental available. Negotiable price. Huge windows, northern exposure, clean and spacious. General dentist practicing 4 days/week. Call (212) 593-7272; or e-mail: happytheeth@drerubin.com.

LONG ISLAND: Hewlett/Five Towns. Rent 1 to 5 operatories per diem or share long term in general practice. State-of-the-art, fully equipped office in professional building. Call (516) 593-2100; or e-mail: info@nycompdent.com.

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MANHATTAN: Brand new dental space to share with high-quality practice on 50th and 5th. Up to 2 treatment rooms. Private office, ample front desk receptionist space. Tremendous light, views of St. Patrick's from 8th floor. Rent negotiable. Call (516) 817-9907; or e-mail: rfriedm3@optonline.net.

LOWER WESTCHESTER: Professional dental office. 4,000 sq. ft. or will subdivide. Newly appointed, modern facilities, central air and heating included. Centrally located on ground floor of medical arts building. Ideal for dental/medical groups. Contact: (914) 723-1111 ext. 104; or e-mail: judy@bruno-associates.com.

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CENTRAL PARK SOUTH: Facing the park. Two operatories available in state-of-the-art dental office. Part time or full time. Staff available if needed. Call (917) 846-6001 or (212) 759-2993, please leave a message.

MANHATTAN: Operatory for rent full or part time at 17th Street and 3rd Avenue. Street-level entrance, 24-hour doorman building. Call (212) 228-1450; or e-mail: gweitzer@gmail.com.

CONTINUING EDUCATION

FLORIDA HEALTH SEMINAR: December 19, 2011- January 2, 2012. Renaissance Hotel, Boca Raton, Florida. Subjects to include Risk Management, Endodontics, Oral Surgery, Child Abuse/Dental Neglect, Pediatric Oncology. Continuing education credits (ADA CERP, AGD). Special hotel and car rental rates available upon registration. Contact Seminar Coordinator Linda Golnick - Phone: (248) 388-1959; Fax: (248) 681-0315; or e-mail: agolnick@comcast.net.

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OPPORTUNITIES AVAILABLE

CAPITAL DISTRICT: Seeking recent graduate and motivated general dentist to join growing practice in Capital District. Inquiries to: drneda@hotmail.com.

ORAL SURGEON: Needed 3-4 days/month to provide oral surgery services to patients in large multi-location group practice in Charlotte, North Carolina. All expenses paid. \$3,000 daily minimum. Short work day. Contact us for questions regarding licensing. E-mail: FNDV2002@gmail.com; or call (704) 235-6075.

NASSAU COUNTY: Seeking specialists. Flourishing, private, fee-for-service/select PPOs practice looking to add specialty services. All referrals internally generated. North Shore Nassau County location. Looking for Board-certified Periodontist, Orthodontist and Oral Surgeon one day per week. Please e-mail resume to: ezputt@aol.com.

DENTIST JOBS: Aspen Dental offers tremendous earning potential and a practice support model that empowers dentists. We eliminate obstacles for dentists to own their own practice. Call (866) 451-7692; www.aspendentaljobs.com.

CAPITAL DISTRICT: Scotia Glenville Dental Center, established group practice in upstate New York, actively seeking PT orthodontist to meet practice's growing needs. 20+ years of proven administration experience allows you to practice dentistry and not worry about business decisions. Terrific opportunity for energetic, motivated orthodontist with superior people skills to join dedicated professional dental team. Six general dentists include all phases of dentistry in treatment planning, including integration of orthodontics and TMJ. Join large group practice at newly renovated state-of-the-art facility in which all general dentists will ALWAYS refer to you. Send resume and salary expectations. Phone/fax: (518) 370-2380; or e-mail: helene.sgdc@gmail.com.

MIDTOWN MANHATTAN: Midtown Manhattan dentist would like to purchase a fee-for-service practice. Relocate to my modern Midtown office that is fully staffed and has Cone beam, laser, digital X-rays, microscope and more. Practice stress free as long as you like and sell your practice. Lower your overhead! Please call (917) 846-5571; e-mail: Honza44@gmail.com.

MANHATTAN: Two-doctor OMFS practice wishes to rent to same with plan for future partnership. Early retirement of one of our surgeons is anticipated. New office currently under construction on Park Avenue. Please reply to NYSJD Box #: O-101.

ROCHESTER: Locally owned, group family practice seeking full- and part-time "exam" DDS to assist our staff of outstanding hygienists treat the needs of our patients. We see children to seniors and maintain 500+ new patients each month. Contact Rosemary (585) 225-7790; or e-mail: rzaepfel@rochester.rr.com.

UPSTATE NEW YORK: Part-time Orthodontist, Endodontist and Pediatric Dentist wanted in upstate New York. Must be a self-starter. E-mail resume: drneda@hotmail.com.

MANHATTAN: Considering retirement or losing your lease? Join us in our modern, high-quality, FFS, prosthodontic practice and work as much or as little as you like. Our experienced staff will help you seamlessly transfer and integrate your patients into our well-managed office. Financial arrangements will be tailored to suit your individual needs. Ideal for general practitioners as well as prosthodontists. Please call Sonia at (212) 697-1122; or e-mail us at: sonia@drpaultanners.com. We're looking forward to hearing from you.

UTICA: Seeking General Dentist full time for new office. Computerized, digital X-rays. \$100,000 to \$150,000, including medical, 401K, paid vacation and CE. Please contact Dr. Ziauddin Shaik at (315) 338-3955; e-mail: ziaasma2@yahoo.com; fax (315) 792-7762.

MANHATTAN: For dentist wishing to slow down or retire and not wanting to deal with responsibilities of running an office this opportunity may be suitable for you. Stay as long as you wish before transferring patients in my comfortable, 5-operator office. When you are ready to retire, I will purchase your practice. We are located at corner of 55th Street and Sixth Ave. Please contact my office manager at (212) 246-4420.

BRONX: Modern periodontal practice located near Einstein Hospital is seeking part-time periodontist. Please call (516) 532-9159.

MONTICELLO & AMENIA: Full-time dentists needed for brand new health center practices in Monticello and Amenia, NY. Competitive salary, excellent benefits, potential for professional loan repayment. E-mail CV and cover letter to: chames@hrhcare.org.

SERVICES

TAXES: Your office, business or personal. Specialty dentists. Personable CPA. Call Stuart A. Sinclair, CPA, at (516) 935-2086. Offices located at 1120 Old Country Road, Plainview, NY 11803.

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SELLERS: We customize a transition plan that's right for you. We offer free consultations and charge only 6% commissions. Local rep right in your area. Contact National Practice Transition Network at (877) 365-6786 (NPTN). For details, visit: www.nptnetwork.com.

ASSOCIATESHIPS AVAILABLE

ITHACA: Retiring dentist seeks buyer or associate dentist with option to purchase thriving practice adjacent to Cornell University. Diverse patient base of 1,500 grossing \$650K on 30 hours/week. Free-standing, 1,500 sq. ft. office, four ops, state-of-the-art equipment. Ithaca is university community of 100,000 with excellent schools and extensive cultural and all-season recreational activities. Inquiries to: (607) 592-5561.

MANHATTAN: Upper West Side. Seeking P/T general dentist, 2 days/week at well-established and respected practice in state-of-the-art facility known for excellent service. Dedicated, professional staff that fully supports the vision of the doctors, committed to providing our patients a healthy smile. Paperless office with EagleSoft, Schick digital X-ray, including pan, Casey patient education. Forward resume by e-mail: modentistry@gmail.com; or fax: (212) 875-8852.

SOUTHERN TIER: Associate position leading to partnership in busy group practice. Looking for skilled and compassionate clinician. 12 ops, digital X-rays, laser, in-house denture lab. Large, well-educated patient base. Call (607) 937-5341; or e-mail: cda@stny.rr.com.

MIDTOWN MANHATTAN: Associate wanted to build up practice in great office with great staff. Learn from the best while you help expand my practice and build your own following. Please call (212) 838-2900; or e-mail: drk@krochak.com.

CAPITAL DISTRICT: GP or specialist needed to join modern, growing, full-service dental group. Potential for partnership. FT and PT positions available. Excellent salary and benefits. Office has been doubled in size and renovated. Call (518) 526-0177; or e-mail: dr.backer.sgdc@gmail.com.

SYRACUSE AREA: General dentist. Growing, modern, digital X-ray, guaranteed per diem up to \$900/day. No administrative responsibilities. Malpractice, vacation, health insurance, student loan assistance. Contact: korr@canalviewdds.com; fax: (315) 593-1896. Visit: www.northeastdentalsite.com.

SOUTHWEST NASSAU CO: Associate wanted. Unique opportunity for self-starter. Potential buy-in/buy-out of 35-year-old complex restorative and general practice. No insurance. Computerized, lasers, digital X-rays, etc. Must have GPR and 3 years' experience. E-mail resume to: nassaudentist@yahoo.com.

CAPITAL DISTRICT: State-of-the-art family dental practice in Latham seeking associate to become partner. Please contact us at: (518) 785-5131; or e-mail resume to: gregory.morrna@yahoo.com.

UPSTATE: Beautiful, 2-college town, 30 minutes from Baseball Hall of Fame seeks associate/partner/future buy-out. Well-established, \$1-million+ practice. Fast-paced, state-of-the-art, newly remodeled office. High-tech, fully computerized. Exciting opportunity in great area. Experience preferred. Fax resume/CV to: (607) 433-1786.

QUEENS: Oral Surgeon needed for busy Flushing general practice. Immediate PT placement. Great opportunity. Please e-mail CV to: adsdds1@yahoo.com.

WESTERN NY: Busy, high-quality, FFS private general practice seeks FT associate for our growing patient base (yes, even in this economy!). Sedation, CEREC and implant experience a plus. Modern, well run, 10- (soon to be 15) op facility with digital X-rays, computerized ops, great reputation and skilled, motivated support staff. Great opportunity for right person. Excellent earning potential, plus bonus. E-mail resume and cover letter: casemanager950@gmail.com; or fax (716) 652-6125. Check us out at www.wmsmile.com.

ALBANY: Associate position in large group practice. Experience necessary. Desire long-term relationship. Buy-in potential for right person. All phases of dentistry in state-of-the-art facility. Send resume via e-mail: doctorad610@hotmail.com.

NASSAU COUNTY: Seeking associate/partner with possible buy-out in southwest Nassau County. Long-established, modern, friendly office seeks motivated, caring individual competent in all phases of general dentistry to start part time. Let's talk! Please call (516) 764-9866; or e-mail: decor888@aol.com.

ROCHESTER: Seeking outgoing, motivated, part- or full-time associate. Highly progressive, well-established office (33 years), digital, laser, CEREC, intraoral camera. Contact Dr. R. Ajay Dass at (585) 424-5660; or e-mail: bridentgroup@aol.com. Website: www.brightondentalgroup.com.

ORANGE COUNTY: Quality family general practice looking for associate to join busy, long-established, 2-doctor practice. Senior dentist ready to retire. Partnership potential available. Please send resume to: wecatertocowards4u@yahoo.com.

NASSAU COUNTY: 40-year-old, established, modern group practice requires highly motivated associate on PT/FT basis. Monday, Tuesday and Saturday a must. Equity position available for right person. State-of-the-art equipment: digital X-rays, hard and soft lasers, new operatories, Velscope, Florida Probe, rotary endo, etc. E-mail resume: karenweiss@levittowndentalgroup.com. Fax: (516) 796-6749.

LOWER MANHATTAN: GP Associate position available for quality practice. Part time leading to full time. Pedo a plus. Fax resume to: (212) 627-8413; or e-mail: drdblaustein@yahoo.com.

ASSOCIATESHIPS WANTED

GENERAL DENTIST: Experienced General Dentist with great interpersonal skills, excellent in all phases of dentistry, seeking PT associateship in Nassau, W. Suffolk, Brooklyn or Queens. Please call (516) 234-0337; or e-mail: shinbet@gmail.com.

QUEENS/NASSAU/SUFFOLK: Experienced Orthodontist to do ortho in your GP or pedo practice 1-2 days per week. Excellent rapport with patients/parents. Standard ortho, Invisalign, Simpliclear. Please e-mail: streightsmile@gmail.com.

PERIODONTIST: Seeking part-time position. Over 25 years' private practice experience seeking part-time or per diem position for either sole or group practice. Proficient in all aspects of periodontics and implantology. Resume available upon request. Please call (845) 357-5002; or e-mail: rosenstein@aol.com.

GENERAL DENTIST: 20 years' experience, proficient in all phases of dentistry. Seeking employment in New York State. Phone: (843) 816-1152; or e-mail: skmano@gmail.com.

GENERAL DENTIST: Good in all phases of dentistry, even better working with colleagues and patients, seeking associateship in greater NYC area or proximal NJ. E-mail: je2195@columbia.edu; CV available at: <http://www.columbia.edu/~je2195/cv.pdf>.

PERIODONTIST: Board-certified Periodontist with 5+ years' experience seeking PT position in general or specialty practice. All patients treated with kindness and very gentle touch. Proficient in all aspect of periodontics and implantology, including complex perio/prostho cases. Please call (617) 416-8886; or e-mail: jpastagia@gmail.com.

Ed Department Waives Fees for Dentists Needing to Replace Storm-Damaged Documents

THE NEW YORK STATE EDUCATION DEPARTMENT has been directed by Gov. Andrew Cuomo to temporarily suspend fees it ordinarily charges to replace license and/or registration documents lost as a result recent flooding and damage in designated disaster-area counties. Until further notice, the fees charged by the Education Department's Division of Professional Licensing Services for issuing duplicate license parchments and registration certificates are suspended for the replacement of documents lost as a result of the disaster.

All requests for copies of any document or record on file with the DPLS should indicate the document to be replaced was

the result of Hurricane Irene and subsequent storms. To replace a lost or destroyed license parchment, write or call: Office of the Professions, Division of Professional Licensing, Records & Archives Unit, State Education Building, 2nd Floor, 89 Washington Ave., Albany, NY 12234-1000; (518) 474-3817, ext. 380.

To replace a damaged, lost or destroyed registration certificate, contact the Registration Unit by e-mailing them at opreg-fee@mail.nysed.gov or calling (518) 474-3817, ext. 410, or writing them at the address above. ☞

Making Compliance a Priority *continued from page 3*

izing that they may be in more trouble for identifying them than not.

3. Detailing Repercussions for Perpetuating Noncompliance. Your compliance plan should explicitly state that covering up noncompliance may result in potential termination from employment. Further, an effective compliance program should establish a chain of command for responding to and dealing with noncompliance.
4. Requiring Training. Your compliance plan will be a place to keep track of required training and education for those conducting billing services at the practice, as well as to track changes in billing and coding requirements for each third-party payor.
5. Holding Your Staff Accountable for Documentation Requirements. Your compliance program should clearly indicate that any practitioner of your practice will be held accountable for failing to take appropriate X-rays during patient care and that any practitioner who fails to abide by applicable requirements will be responsible for the repercussions.

It's worth noting that many practitioners report an increase in their reimbursement upon adopting a compliance plan. Because their staff has a written policy to follow when performing billing, practitioners find that fewer errors are occurring and the result is increased reimbursement.

CONCLUSION

A compliance plan is a preventative measure you implement to keep your practice in top shape to avert potential problems in the future by mitigating billing errors and protecting the integrity of the practice's documentation and operations. In that regard, it's not unlike the advice dentists give to their patients daily: preventative medicine pays. ☞

Ms. Kirschenbaum manages Kirschenbaum & Kirschenbaum's healthcare department, which specializes in representing healthcare practitioners in regulatory compliance, audit defense, licensure and transactional matters. She is a member of the New York State Dental Association Legal Services Panel. Should you require assistance acquiring and implementing a Medicaid compliant program, she can be reached at Jennifer@Kirschenbaumesq.com or (516) 747-6700. Or visit the firm online at www.nyhealthcareattorneys.com to view compliance plan options.