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President's Report



Welcome to the inaugural issue of the new Maryland AGD newsletter! Thanks to our Editor, Amir Karimi, and our Executive Secretary, Alice Blayne-Allard, for all of their hard work in putting this

together. The goal of the newsletter is to give updates on the Maryland Academy of General Dentistry, including CE offerings, other events, and information pertinent to Maryland AGD members.

Our practices and lives have been upended by the Covid-19 pandemic, and this includes all of our Maryland AGD plans for the foreseeable future. Please remember that the Maryland AGD, along with national Academy of General Dentistry, the Maryland State Dental Association, the American Dental Association, and numerous other dental organizations, are working to help our profession. We are lobbying in the state and in Washington D.C., disseminating timely information, and playing a critical role in defending the rights of dentists given the challenges we are facing. Our service to the public is the main obligation of our profession, but we also have a responsibility to ourselves, our staffs, and our families. I urge you to stay connected with the AGD, ADA, and your colleagues during these difficult times.

Stay healthy, and I hope we will all be back to normal soon.

Larry Katkow, DDS, MAGD
President, Maryland AGD

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Important updates on how coronavirus will be affecting the practice of dentistry in Maryland, as well as status of new bills.

Schedule of Events

SEPTEMBER - NOVEMBER 2020

July 15 - 18

Academy of General Dentistry
National Meeting

Location

Las Vegas, Nevada

September 11

7:00 A.M. – 1:00 P.M.

Infectious Control/PANDA CE Seminar

Location

TBD

October 2

8:30 A.M. – 4:30 P.M.

SPEAKER SERIES

Cone Beam 3D Imaging:
More than 50 Shades of Gray

Speaker

Dale Miles, DDS

Location

Tommy Douglas Conference Center
10000 New Hampshire Avenue
Silver Spring, Maryland

October 23 - 25

Academy of General Dentistry
House of Delegates

Location

Chicago, Illinois

October 30

8:30 A.M. – 4:30 P.M.

SPEAKER SERIES

Minimally Invasive Dentistry
& Digital Dentistry Simplified

Speaker

Ron Kaminer, DDS

Location

Maritime Conference Center
692 Maritime Boulevard
Linthicum Heights, Maryland

2020 Master Track Program
48 CE Credits | Lecture/Participation

November 12

AGD 690 Endodontics

Speaker

George Bruder, DDS

November 13

AGD 070 Implants

Speaker

John DiPonziano, DDS

November 14

AGD 670 Removable Prosthodontics

Speaker

John DiPonziano, DDS

All Courses Will Be Located at:

Maritime Conference Center
692 Maritime Boulevard
Linthicum Heights, Maryland





How to Land Your First Associateship Position

AMIR KARIMI, DDS

The search for my first job as an Associate Dentist started about 4-5 months prior to graduation from dental school. I had planned to go directly into private practice upon graduation. As I am writing this article now, I have been in private practice for about a year. While the methods that I am about to discuss are ways I was able to obtain my position as an Associate Dentist, I am not saying it is the only way; nor do I consider myself an expert in this topic. I am simply sharing my experience in hope that it will help new dentists who are finishing up dental school or their dental residencies.

I started by updating my CV, making sure to add any relevant dental related certificates, trainings, leadership experiences, etc. Next, I created a rough draft of a cover letter where I could go back and customize to match whichever job opportunity I was applying for. Once the CV and cover letter were in place, these are the steps I took and what I would recommend.

The Search

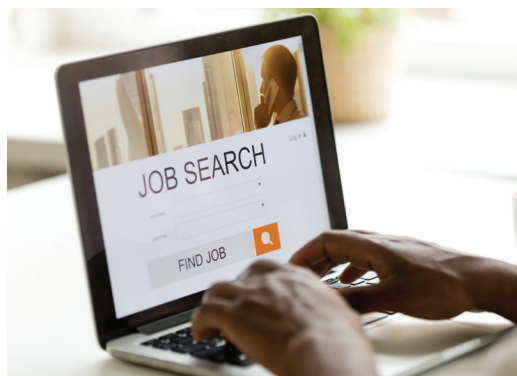
The first thing in your search is the most obvious, looking for ads. However, knowing where to look isn't always straightforward. A great majority of dental publications such as AGD's General Dentistry and ADA's JADA, have a classified section that is divided by states, I would recommend going through them. Next, visit job search sites such as Indeed to check out the listings in the areas you might be interested in. Perhaps the most important and effective measure you can take is to contact your area's dental supply rep. They are consistently in and out

of dental offices and typically have a very good relationship with the owner dentists. They sometimes will know if a dentist is looking to bring on an associate even before the ad has been placed. Henry Schein and Patterson are two of the most popular dental supply companies that dentists use. Another great resource is Henry Schein's Dental Opportunities website, where you can sign up to have listings of available positions emailed to you.

Additionally, you can, and should get involved in your dental society and local AGD constituent. Most often, they will have job listings posted on their websites. Attend their events, they are wonderful networking opportunities; you can introduce yourself to local dentists, and quickly discover opportunities and mentorship.

Cold Calling Offices

Once I had determined the area that I wanted to practice in, I started calling practices in that area and asked if I could shadow the dentist.





Fast Fact

Employment of dental assistants is **projected to grow** 11 percent from 2018 to 2028, much faster than the average for all occupations. The aging population and ongoing research linking oral health and general health will lead to continued increases in the demand for preventive dental services.

Do your homework, know who the owner dentist is in that office and ask to shadow him. While there is value in shadowing other associates in that office, you have a better shot at landing a job opportunity by spending time with the owner. I scheduled about 4-5 office visits; if you're looking into areas that are far from where you are currently located, you can schedule them during your Spring/Winter Break or request days off from residency. During your visit at the offices, try to learn as much as you can about how they operate. Ask questions about what the doctor looks for when deciding on an associate. You could also ask him/her if they're looking for an associate.

There are so many times that an owner dentist is thinking about bringing on an associate dentist but is hesitant; by asking, you will probably receive one of three responses: "No" or "No, but I know a colleague/friend who is looking" or "Actually yes, I've been thinking about bringing on an associate." The latter would be the best-case scenario because you both have already met, which would make the interview process much easier. If he says no, don't be discouraged, you still hopefully gained valuable knowledge about that particular practice and/or qualities that they would look for in an associate.

The Interview

Once you have scheduled your interview, it's time to do more homework. Make sure you understand the services the office provides. If it doesn't provide a service that you know you can do, make a note to ask why they don't offer it. For example, my practice did not offer Invisalign or Botox, yet I was trained and certified in both. So, I asked if they would be interested in offering those services to their patients as a way to increase production; It adds value to your application. Most importantly, there is no need to be nervous during the interview. It is not like the dental school interview. You will probably end up shadowing or touring the office a little bit and then speaking with the owner dentist and/or the office manager. The conversation will be about you and the office, so there is no complex question that you won't know the answer to already. Be honest! For me, practice ownership is very important, and I made sure to relay that during the interview. If there are any ownership/partnership opportunities available down the line at that office, by stating your goals/intentions, you will find the answers.

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It's also important to note that the Interview isn't just about you being interviewed, but also you interviewing the owner. Prepare a series of questions to ask the owner, in order to better understand what state the practice is in. Some important questions to me are: What is the average monthly Production? What percent of production is coming from hygiene? How many new patients a month are they receiving? What is the office overhead expense? What is the office turnover for staff? and so on. You should also know what the average numbers for these metrics should be. Then you can understand if this office is a proper fit for you or not.

Typically, during the interview, certain topics are discussed that will later be in the contract. Most importantly the compensation, restrictive covenant, benefits, etc. Make sure you are comfortable with those offers. Feel free to discuss them further during the interview, and perhaps even negotiate a little bit without being overbearing. If you negotiate during the interview, the agreed upon terms will be in the contract, which saves time and prevents going back-and-forth as much after the contract is drafted.

The Contract

Once you have the contract in your possession, read it thoroughly, highlight any questions you may have, and contact a dental attorney. Don't be afraid to contact the owner dentist and ask your questions and discuss your concerns. Once you both have found the middle ground, make sure you read the revised contract and make note of the changes before signing.

After signing the contract, but before you start working, try to schedule a few days where you can go and shadow. It's a good idea to meet the office staff and break the ice. You will also create a solid understanding of how the office operates, how hygiene exams are performed, dental treatment plans are discussed with patients, and so on.

Conclusion

I think it's important to realize that the dentist or organization (if you go the DSO route) that decides to hire you is taking a risk. So, make

their decision easy for them. Highlight what you will be bringing to the office. While it's nice to have more experiences that will set you apart from other candidates, it's even more important to have a good personality. Being able to connect with patients and treat them as if they are your friend/family will go a long way for ensuring your success at your new job. Have an open mind and be ready and willing to absorb as much information as possible. In the first 3-4 months of working in private practice, I learned more than all 4 years of dental school combined. In the future newsletters, I'll discuss ways to maximize your experience during your first year in private practice.



AMIR KARIMI, DDS
Editor in Chief

Dr. Karimi is an Associate Dentist who currently practices in Olney and Rockville, MD. Aside from his involvement with Maryland AGD, he is also focusing on earning his Fellowship in AGD.

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Retirement—What are you thinking?

CHARLES YOUNG, DDS FAGD

There is a wealth of retirement planning information, from any number of sources, available to dentists contemplating retirement. This information is invariably focused on financial planning. Certainly, finances drive a lot of the planning process and adequate savings are critical to a comfortable retirement. But there is more to planning for retirement than financial planning. There is little discussion about the psychological aspects and the thought process leading up to retirement and what effect the transition from practice to retirement will have on the individual.

The thought of retiring can be a hazy goal, some place in the distant future, if you are in the middle of a work week dealing with patients and running a practice. At some point that haze will clear, come over the horizon and become a reality. Sometimes this change comes about for health reasons (how's your back doing?) Sometimes loss of interest in clinical practice, or maybe changes in personal life. Inevitably, for one reason or another, everybody will need to wrestle with how and when to stop practicing.

First it should be said that more than a few doctors like the practice of dentistry and want

to continue past a "typical" retirement age. But how do you know when to retire? How do you even know when to start the process? So, what is a "typical" age for a dentist to retire? According to the ADA, currently the average dentist retires at age 68.9 (data from 2017). Interestingly that age has gone up since 2001 when the average dentist retirement age was 65. Clearly it has gotten tougher to accumulate enough savings to retire at that earlier age and with the ongoing economic upheaval the timing might take longer still.

In any case, different doctors will approach retirement in different ways and at different ages. For many, the thought of retirement starts to come into focus when they approach a financial comfort level. This is usually a number that is the result of some form of financial planning, formal or otherwise and represents an identifiable planning benchmark. Many financial planners, with knowledge of dental practice economics, recommend that planning a practice transition has a 3-5-year time frame. This allows enough time to more properly configure a practice financially for a potential sale, and I might add, time to think about what the transition will mean to

you personally. Usually, but not always, this transition is accomplished by sale to another practitioner, typically done through a practice broker. Other times the sale can occur internally in a group practice or sometimes to a family member. Other transition strategies include sale to a larger corporate entity such as Heartland or Aspen or sometimes a smaller more local DSO. Some choose to taper down to part time and then close their practice without sale. Different doctors and their practices present with different needs and different opportunities, but consulting with practice transition professionals can be a big help in determining your options and your timing. If you do decide to sell your practice, they can also help to appraise and maximize the sale price of the practice. For many, the sale of their practice is one of their primary financial planning assets.

Beyond the total amount of money saved for retirement, there are other considerations that are also an important part of retirement planning. Many of which are not discussed with regularity.

Beyond achieving a financial goal, retiring also involves becoming comfortable with a change in the patterns of day to day living that have developed over a dental practice lifetime. For a doctor that is “done” with treating patients, this adjustment is easier and in many ways, desirable. Even for doctors looking forward to retirement, the path is not so clear and can involve conflicting thoughts and emotions. Do you enjoy patient contact? Are you fearful of not being productive, not being busy? How much time do you spend at home versus at your practice? How much of your identity is tied to being an active part of the work force versus being retired? How closely is your self-image tied to being a practicing dentist managing an office and staff versus being a “retired dentist”? How comfortable are you turning over patients who you have treated for many years to a new and often younger doctor? These and many other questions can arise as you consider retirement.

It can be a surprisingly difficult transition psychologically to go from a full time, fully involved dental practice to full retirement in one step. Some try to manage this part of the transition by a cutting their hours from full time to part time. This approach can be tricky especially for a solo practitioner as it introduces a number of staffing and economic



changes into a practice. Simply, slowing down reduces the sale value of a practice. Bringing in a part-time associate can be disruptive to an established practice and if not properly handled, can also have a negative impact on practice value. Ultimately, you will not be spending your days going to the office. Most likely you will be home more than your family and spouse are used to. How will they adjust to this change in their daily living patterns? Everybody's situation is different but this change in your daily pattern will have an impact on the family and friends around you. Doctors are often urged by their partners to retire. That is, until they find they get twice the partner and half of the income.

Retirement is often portrayed in the media as equivalent to a constant vacation. An eternal hand in hand stress and pressure free walk on the beach. That's not the reality. The stresses and pressures of daily living do not go away but they can and will change and can be reduced in retirement. Others considering retirement often are afraid that they will have nothing to do and will be bored to death. That's not the reality either. The reality, as you might guess, lies somewhere in between. It is true that you will need more than your hobbies to stay occupied. However, if you do want to retire, have some faith in yourself; you have figured out how to get things done so far. You can also figure out how to manage your time in retirement and find something else other than the practice of dentistry to occupy your day.

Retirement planning is more than financial planning. Financial planning can tell you when you might be able to retire financially but it is not the complete picture. The process involves planning, bringing together many elements and for many, a lot of internal self-appraisal.

Maryland Academy of General Dentistry welcomes our newest members:

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Coronavirus Federal Legislative Update

STEVE FELDMAN, DDS



The Coronavirus pandemic has brought the federal legislative processes to a halt. While legislative priorities are shifting as the situation develops, Academy of General Dentistry and its Maryland constituent (MAGD) are in frequent correspondence with legislators in Washington, DC and Annapolis. Rest assured that MAGD is committed to fighting for the needs of general dentists during this crisis and supports reopening dental practices for routine treatment, with appropriate precautions to ensure safety.

Currently, dentistry is listed under Maryland's Phase 1 reopening, as a low-risk business. This designation is due to dentistry's track record as a leader in infection control and the ease with which social distancing can be implemented.

Availability of PPE for Dentists

At the time of publication, the Federal Emergency Management Agency (FEMA) continues its refusal to classify general dentists as high priority to access N95 masks. Limited access to in-demand PPE may impede dentists from reopening in a timely fashion. **AGD is continuing its ongoing discussions with FEMA.**

Coronavirus Liability

Businesses, including dental practices, could face a wide range of lawsuits related to Covid-19. The most likely plaintiffs are patients who contract the virus. Legal claims from employees are limited by workers' compensation laws. Liability protections can be

implemented by federal regulation or executive action, though the broadest protections would require Congressional override of state laws. Routine dental procedures are excluded from the liability protections in the CARES Act, which only applies to healthcare provided as part of the emergency response to Covid-19.

Coronavirus Business Interruption Insurance

H.R. 6497, the Never Again Small Business Protection Act

This bipartisan legislation, if enacted, would require business interruption insurances to provide coverage for losses that stem from any government-ordered business shutdown following a declaration of national emergency. Coverage would support businesses that are impacted for thirty days or more with the requirement that businesses keep employees employed and maintain employee health insurance coverage. **AGD has communicated support for the bill to its lead sponsor, Rep. Brian Fitzpatrick (PA-01).**

Economic Recovery

America's Recovery Fund Coalition

The America's Recovery Fund Coalition, a group of over 100 business organizations, representing 45% of America's workforce is advocating for Congress to create a federal direct assistance fund. This fund would provide rapid liquidity to businesses impaired by the Coronavirus pandemic. The goal of the fund is to help businesses maintain ongoing capital obligations during the prolonged shutdown and subsequent months of economic healing. This will enable employees to continue receiving pay and maintain their benefits, while former employees can be rehired as businesses resume operations. **AGD is a member of this coalition.**

HEROES Act

H.R. 6433, the Helping Emergency Responders Overcome Emergency Situations Act

Designed to mirror the income tax exemption granted to members of the military serving in combat zones, this legislation, if passed, would provide a four-month federal income tax holiday for medical professionals, including dentists, in counties with at least one Covid-19 positive patient. The tax holiday could be extended for up to an additional three months. **AGD has sent a letter of support to the bill's sponsor, Rep. Bill Huizenga (MI-02).**

Maryland Legislative Update

CHARLES A. DORING, DDS, MAGD

For the first time since the Civil War, the Maryland General Assembly adjourned early, due to the Coronavirus pandemic. The legislature is expected to reconvene for a special Summer Session if conditions allow. Despite the shortened legislative session, Maryland AGD achieved a number of key policy goals that represent the culmination of many years of advocacy efforts.

Non-dentist Ownership of Dental Practices

SB 174 and HB 939 – State Board of Dental Examiners – Practice of Dentistry Revisions

These bills clarify that no individual may have any ownership stake in a Maryland dental practice, unless they are a Maryland licensed dentist. The bills also clearly delineate the functions that only a dentist may perform, as well as those administrative functions or services that may be provided by non-dentists. It protects patients and the doctor-patient relationship by making it clear that it is illegal for any non-dentist to interfere with diagnosis or treatment of a patient. Additionally, by prohibiting fee splitting, or sharing a percentage of revenues with an entity outside of the practice, these bills remove much of the incentive a non-dentist would have to interfere in patient care. Finally, the bills make void and unenforceable any contractual provision (such as a nondisclosure agreement) that would prevent an individual from testifying before a court, the legislature or the State Board on violations of the Maryland Dental Practice Act. **SB 174 and HB 947 passed.**

Illegal Practice of Dentistry

SB 169 and HB 947 – Health Occupations – Violations of the Maryland Dentistry Act – Penalties and Cease and Desist Orders

These bills raise the penalty for illegal practice of dentistry from a misdemeanor to a felony punishable on the first offense with a fine of up to \$5,000 and imprisonment of no more than 1 year. Subsequent offenses are punishable with a fine of up to \$20,000

per day and imprisonment of no more than 5 years. These bills also allow the State Board to issue cease and desist orders to individuals practicing dentistry without a license. **SB 174 and HB 947 passed.**

Taskforce on Oral Health

SB 511 – Taskforce on Oral Health in Maryland

This bill would have established a taskforce to undertake a comprehensive review and analysis of all factors that cause Marylanders to fail to receive dental care. Despite being sponsored by the entire Senate Finance Committee and passing the full Senate unanimously, this bill failed to have a hearing or vote in the House Health and Government Operations Committee. **SB 511 failed.**

MidAtlantic Dental Transitions

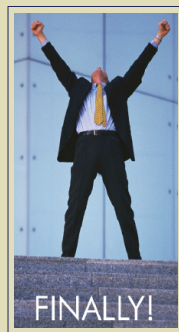
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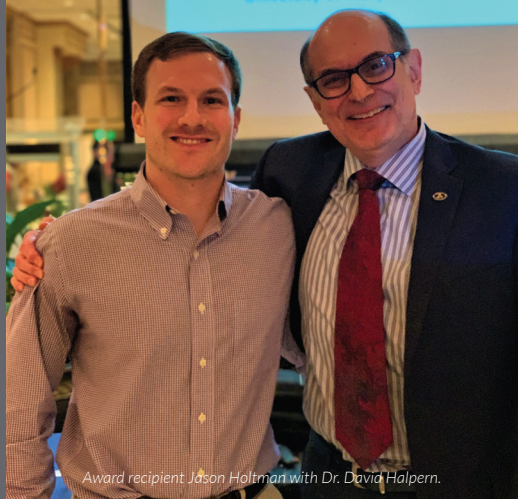
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SPEAKER: CHESAPEAKE DENTAL CONFERENCE

James G. Richeson, Jr. Leadership Scholarship Award

The Academy of General Dentistry Region 5 (DC, DE, MD, and VA) presented Maryland AGD Student Chapter President Jason Holtman with the The James G. Richeson Jr. Leadership Scholarship Award on March 6, 2020, in Greenbelt, Maryland.

Over the last four years at the University of Maryland School of Dentistry, Jason has served in numerous leadership roles, promoting and growing the student AGD chapter. As president of the student chapter, he has organized successful courses and events for the dental students including business courses and networking events. Jason is active in countless volunteer organizations both in and out of dentistry.



Award recipient Jason Holtman with Dr. David Halpern.

The award honors the memory of Dr. James "Jim" Richeson, a dentist, mentor, and friend to many and leader in both the ADA and AGD for many years until his untimely death.

Maryland AGD congratulates Jason on this well-deserved honor!



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Questions or comments?
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