

# ADA News

THE NEWSPAPER OF THE AMERICAN DENTAL ASSOCIATION

12.11.23

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## Influencing the future of dentistry

### Twin sisters offer tips and tricks to expand online presence

BY OLIVIA ANDERSON

**A**lisha and Natasha Nanji have a long list of titles to their name. They're twins, dental students, entrepreneurs and, more recently, social media influencers.

Because the sisters grew up with a father who is a dentist, the family had countless dinner-table conversations about the dental field. As they got older, it gradually became clear to both Alisha and Natasha that a career in dentistry would become their path, too.

After earning their undergraduate degrees from Cornell University, the twins took a gap year while attending the Harvard School of Dental Medicine, where they're currently in their last year. During the gap year, they created a startup called AppBuddy. The app, a mentorship platform that aimed to combat educational inequity, was selected as one of 120 companies out of 7,900 applicants to receive \$125,000 in funding.

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### SPECIAL ISSUE:

## Lifestyle



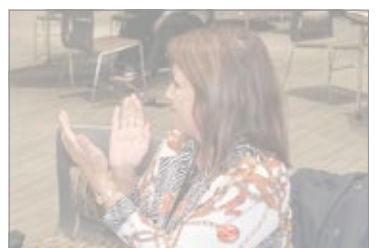
### 4 Dentists share 2024 resolutions

Hopes, motivations for New Year voiced



### 5 Guidance on terminating network agreements

ADA council provides dental insurance help



### 14 ADA continues advocacy for veterans

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"The reason we started that is because we see technology as making a scalable impact," Natasha said, noting that there is also a personal component at play — the Nanjis' father immigrated to the United States from Uganda and their mother from Tanzania. "Throughout our entire life, the one thing that kept coming up was how education from our parents was their passports out of poverty, so for us, education has been ingrained from such a young age, and we're very interested in the technology impact to make that scalable impact and tackle those inequities."

They've also partnered with the ADA to highlight the Association's Member App, which assists users in finding dental mentors, career pathways and tracking CE progress. The twins posted two reels on their joint Instagram account featuring the app, in hopes of helping their followers — many of whom are dental students — find community and resources.

Through their venture into technology, the twins became very social media



savvy. They initially began a joint Instagram account in August 2019 to document their journey in dental school and offer tips they've picked up along the way. Gradually, the account grew; it currently boasts about 96,000 followers as of press time and has led them to speak at more than 50 high school and college clubs to date. Alisha and Natasha often receive messages from followers either requesting networking connections recommendations, asking questions about their dentistry journey, or simply thanking them for their tips and openness in sharing their own experiences.

"It makes us so happy because you're putting content out there and you don't really know how it will resonate with people. Just to get that positive

feedback and positive response — it's super cool to be able to actually see the impact it's having," Alisha said, smiling.

For anyone in the dental space interested in expanding an online presence, the Nanji sisters compiled six tips and tricks to help jumpstart the endeavor.



#### Understand your goals.

There are a variety of reasons to use social media as a dental professional, from wanting to mentor the younger generation to increasing your patient base. The twins suggested cementing one to two main purposes for joining social media and then holding to them.



#### Choose the right platform.

Oftentimes, different social media platforms best cater to different demographics. TikTok, for instance, is a video-sharing social media app that allows users to create short-form content about any subject and is particularly popular among younger generations. LinkedIn, on the other hand, is a platform geared toward business, employment and networking opportunities. According to the Nanji sisters, it's important to learn about the unique offerings of each platform in order to choose which channel is the best fit.

See *INFLUENCE*, Page 4

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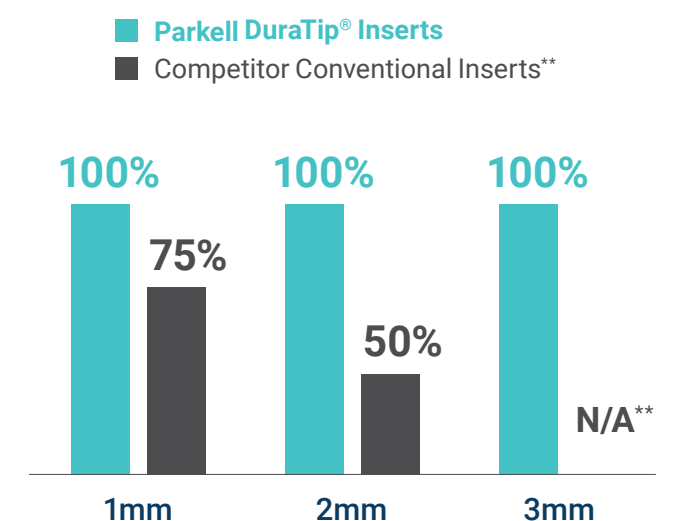
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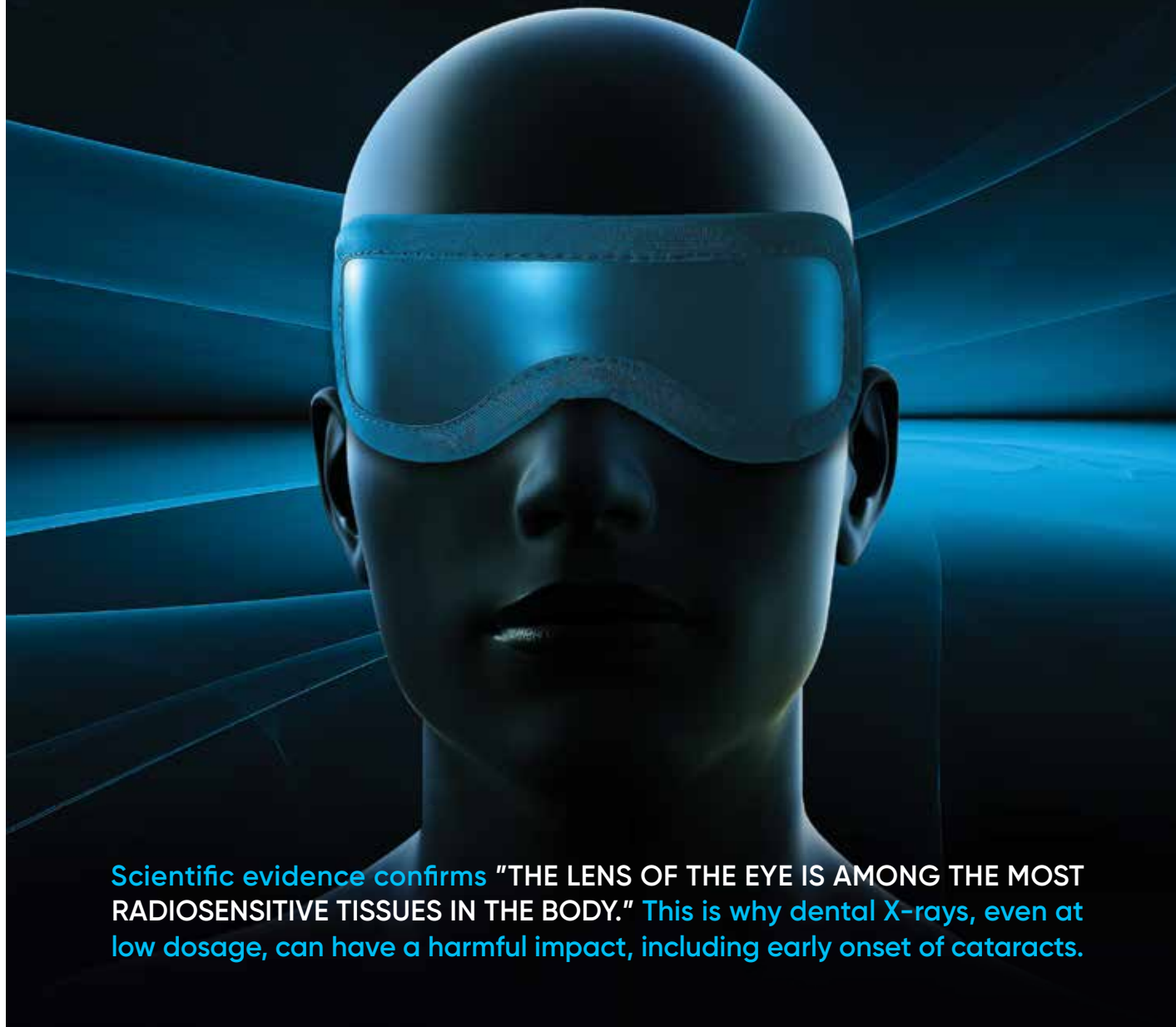
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# What are your New Year's resolutions?

## Dentists share their hopes, motivations for 2024

BY DAVID BURGER

The arrival of a new year leads to many promises of lifestyle changes: More exercise. Save money. Lay off the sweets. For dentists, the same vows are made, but are not limited to just those. The ever-changing nature of the profession carries with it demands to continue delivering optimal care for all patients while still looking for ways to improve on the great work they do every day of the year.

The ADA News asked dentists from across the nation what their professional resolutions for 2024 were, and the answers showed how much professional goals and personal hopes are intertwined – all with eyes on the betterment of the patient.



**Emma J. Guzman, D.D.S., New York City**

My resolution for 2024 is that my professional career will look much different than what is has looked like in the past. I am going

through a transformation and focusing on what truly makes me happy and makes a difference outside of clinical dentistry. I am taking the steps now to increase my involvement in organized dentistry through my roles in the 2nd District Dental Society. I am going on a dental mission trip to Jamaica in January with the Jah Jah Foundation, starting off the year with service, and I plan to continue to immerse myself in service work, as I have always been passionate about it. I also plan to teach and speak professionally. 2024 is going to look very different, and I look forward to the professional change.



**Steve Carstensen, D.D.S., Bellevue, Washington**

In 2024, my resolution is to help more people breathe better every night. How I plan to make this difference is to encourage dentists, physicians, physical therapists, speech pathologists and others to find ways to be part of the breathing solution. The more health care professionals know about breathing problems, the more impact we can all have on community health.

Dr. Carstensen



**Margaret S. Gingrich, D.D.S., Big Rapids, Michigan**

Find an associate and hygienist; learn to say no when prioritizing my needs versus the needs of others; continue learning and implementing new technologies to keep up with the fast-paced growth of dentistry; using laser for more applications like frenectomies; and get the staff to agree on one office temperature.

Dr. Gingrich



**Hal S. Jeter, D.D.S., South Point, Ohio**

My New Year's resolutions for 2024 are to continue to pursue excellence, share what I've experienced with others and strive to make a bigger contribution to the lives around me. This includes pouring more of myself into my family — my wife, my children and my beautiful granddaughters. At the end of the day, my legacy in them is the most essential.

Dr. Jeter



**Jennifer A. Keegan, D.M.D., Tinker Air Force Base, Oklahoma**

My 2024 resolutions include working to increase efficiency while maintaining excellent dental

Dr. Keegan

care, as well as working to improve on third molar extractions and endodontics. I also want to strive to be excellent at explaining dentistry so that my patients are educated and informed. As a captain in the Air Force, I aim to work hard to be a respected and approachable leader to my fellow airmen and coworkers. Doing so would help us to work as a team to accomplish our mission of providing dentally ready military men and women who are safe to deploy.



**Ansley H. Depp, D.M.D., Highland Heights, Kentucky**

For 2024, I have a couple of new resolutions. After taking on a new role at the University of Louisville School of Dentistry as ethics course director, I want to continue to help this new generation of dentists see all of dentistry through an ethical lens. The ADA has a great opportunity to emphasize their Principles of Ethics and Code of Professional Conduct with the students and new dentists. It's a joy and privilege to work with the next generation of dentists to help them understand the positive impact we can have on each patient and the responsibility we have to impact patients and communities positively.

Dr. Depp

My second resolution is simple. I want to appreciate the positivity in each day. After my Dental Dilemmas podcast interview with Ar-Nelle Wright, D.M.D., I realized that I needed to try to be my best self each day, no matter what the day brings. So, I'm going to focus on positivity not only in my dental career but my daily endeavors for next year. ■

INFLUENCE *continued from Page 1*



**Be consistent.** The dental field can be overwhelming and busy, the sisters acknowledged, as patient care is always the first priority. But understanding that "consistency is key" when it comes to posting online will help grow an internet presence, they said. There are apps to help schedule posts, as well as to curate social media feeds.



**Engage with your audience.** The twins stressed the significance of interacting with your audience, whether by liking comments or responding to direct messages. Creating a sense of real community will likely make people feel valued, and as a result, want to stick around.

"At the end of the day, remember that even though it shows a number, every person following you is a person in real life, so it's so important to engage with them," Natasha said.



**Keep pushing.** Although low follower counts at the beginning might prove to be discouraging, it's helpful to remember that growth usually happens gradually. Try not to compare your online presence to other content creators, focus on your own platform, and celebrate the little wins – because they might not be so little after all.



**Be authentic.** Social media doesn't always accurately reflect reality, with glamorized and heavily edited photos often taking centerstage. But the Nanji twins have found that showing the more raw, messy and real aspects of their life have actually created a stronger connection with their followers.

"It just reassures people. If you've failed, if you've gotten rejected, if your room is messy, that is okay," Alisha said. "To be relatable, be authentic, just be yourself and don't worry about acting like someone you're not on social media." ■

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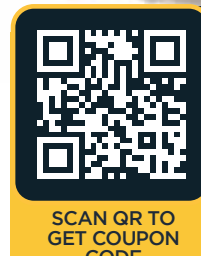
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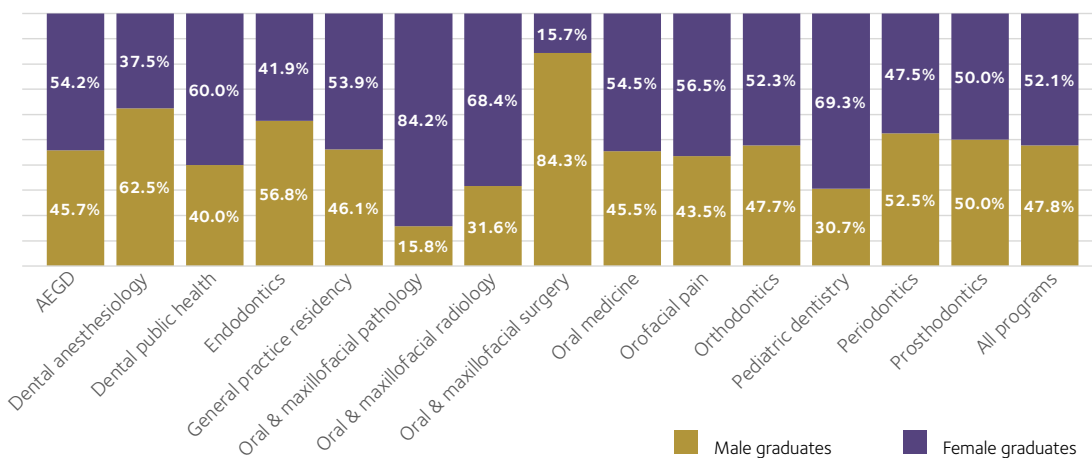
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HPI CORNER

# Advanced education program graduates

Females made up more than half (52.1%) of 2022 graduates from all types of advanced dental education programs. Females made up more than half of graduates in nine of 14 program types while male graduates made up the majority of graduates in dental anesthesiology, oral and maxillofacial surgery, and periodontics.

Source: ADA Health Policy Institute. 2022-23 Survey of Advanced Dental Education. Available from: ADA.org/resources/research/health-policy-institute/dental-education. Notes: For bars that do not add up to 100%, the remaining amount is "Other/unknown." AEGD: Advanced Education in General Dentistry.



PRACTICE

## New ADA guidance released on terminating network agreements

BY DAVID BURGER

Editor's note: Dental Insurance Hub is a series aimed at helping dentists and their dental teams overcome dental insurance obstacles so they can focus on patient care.

The ADA Council on Dental Benefit Programs has created a new online document, Terminating a Network Agreement, which seeks to answer frequently asked questions, including:

- How much time is needed to terminate the agreement?
- Where do I send the termination letter?
- What should I expect after the termination takes effect?

"You may find that it's time to renegotiate your network fee schedule or even that participation is no longer working in your practice," said Sara Stuefen, D.D.S., chair of the Dental Benefit Information Subcommittee of the council.



Dr. Stuefen

"Terminating an agreement can be complicated and you may not know where to start.

The guide starts by reminding dentists to consider the use of the ADA's Contract Analysis Service before signing the initial agreement.

The ADA has also created contract negotiation tools including a guide to help you with any fee discussions with dental insurance plans.

The ADA has an online hub for ready-to-use dental insurance information that can help dentists address and resolve even their most frustrating questions at ADA.org/dentalinsurance.

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# Your ergonomics guide to a healthy lifestyle

## ADA offers resources to support dentists' physical wellness

BY MARY BETH VERSACI

**D**entists are often subjected to uncomfortable postures, repetitive hand motions and noisy handpieces as they care for their patients. That combination can lead to pain and hearing loss.

In the American Dental Association's 2021 Dentist Health and Well-Being Survey Report, 84% of dentists reported pain or discomfort while working, most commonly in the neck,

shoulders and back. Of those dentists, 14% indicated the pain interfered with their work.

More than a third of dentists reported experiencing hearing issues, and of them, over 60% had not been evaluated by an audiologist.

The ADA Practice Institute offers resources to assist dentists with preventing pain and hearing loss. See below for ergonomic stretches to help avoid work-related pain and injuries as well as tips to protect your hearing.

For additional wellness resources, visit [ADA.org/wellness](https://ada.org/wellness). ■

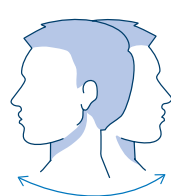
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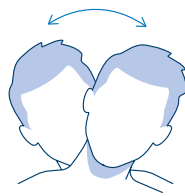
Taking regular breaks to stretch throughout the day can help prevent work-related pain and injuries.

Get more in-depth resources to help you practice at your best at [ADA.org/wellness](https://ada.org/wellness).

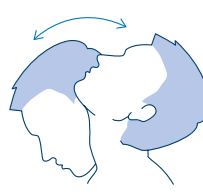
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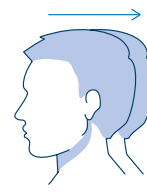
Neck Rotation



Neck Side Bends

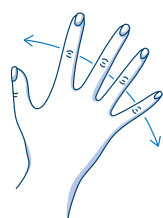


Neck Extensions

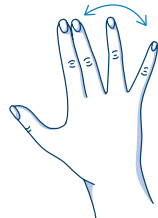


Neck Retraction

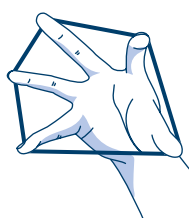
### HAND / WRIST



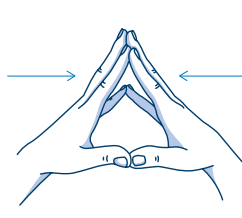
Finger Spreader



Finger Wiggle



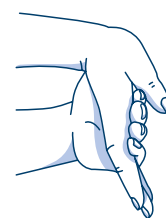
The Rubberband



Finger Prayer Stretch



Wrist Flex



Wrist Extension

### TORSO



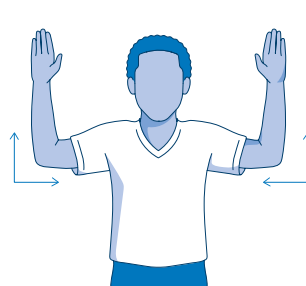
Touchdowns



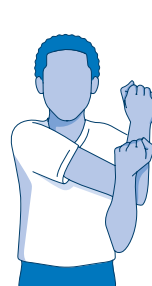
Side Bend Stretch



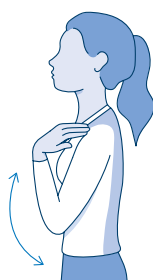
Behind Head Chest Stretch



Chest Stretch



Shoulder Stretch



Elbow Flex/Extensions



Low Back Standing Stretch



Low Back Stretch



Upper Back Stretch

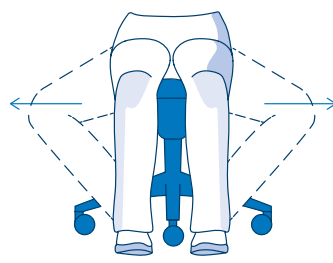


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# HPI examines dentist workload impact from staffing shortages

**More new research, including dashboard on wages, job counts, posted online**

BY DAVID BURGER

**D**entists report taking on additional tasks as staffing shortages persist, according to new data from the ADA's Health Policy Institute.

Of the more than 1,000 dentists surveyed in the October 2023 edition of HPI's Economic Outlook and Emerging Issues in Dentistry poll, more than one-third reported that workload division has changed between themselves and their teams since the beginning of the COVID-19 pandemic, with many dentists taking on duties normally assigned to dental hygienists, dental assistants and administrative team members.

Additionally, when asked whether staffing shortages or low patient demand concerned them the most, more than half of poll respondents said they are concerned about staffing shortages, while about one-third said they are concerned about low patient demand for care.

## NEW U.S. BUREAU OF LABOR STATISTICS STATS

The U.S. Bureau of Labor Statistics released data on wages and currently filled positions in dental offices. HPI created an interactive dashboard to visualize the data at both the national and state levels from 2001 to 2022.

See the dashboard at [ADA.org/resources/research/health-policy-institute/wage-and-job-count-dashboard](https://ADA.org/resources/research/health-policy-institute/wage-and-job-count-dashboard).

## RESEARCH BRIEF ON CAREER TRANSITIONS, SATISFACTION

In a new research brief, HPI analyzes career transitions and job satisfaction among new dentists. Findings include:

- New dentists are likely to remain within the same practice type over a five-year period. This is true regardless of practice size or dental service organization affiliation status.
- In terms of career satisfaction, new dentists prefer unaffiliated private practices, described as non-DSO, non-multisite group practices. At the same time, HPI research indicates there are pros and cons associated with different practice settings, and new dentists might make their selections based on how much they value various aspects of the practice environment.
- Debt is not a major driver of career choice for dentists in this initial career stage.

## UPDATED INFOGRAPHIC ON PRACTICE OWNERSHIP

HPI has updated its infographic on key trends in practice ownership. Practice ownership among dentists in private practice has been declining over the years, dropping from 84.7% in 2005 to 72.5% in 2023. The decline is more pronounced among younger dentist cohorts.

## SIX NEW REPORTS ON DENTAL EDUCATION RELEASED

New data from the annual Survey of Dental Education, Survey of Advanced Dental Education and Survey of Allied Dental Education Programs has been published for the 2022-23 school year.

All three surveys were conducted on behalf of the Commission on Dental Accreditation.

Readers can find information on dental school enrollment and graduate figures, data on 770

advanced dental education programs across 16 different disciplines and other data on dental hygiene, dental assisting and dental laboratory technology programs.

Learn more at [ADA.org/HPI](https://ADA.org/HPI). ■

### PERCENTAGE OF DENTISTS WITH AN ADEQUATE NUMBER OF NON-DENTIST STAFF IN THEIR PRACTICE, OCTOBER 2023



Source: American Dental Association Health Policy Institute. Economic Outlook and Emerging Issues in Dentistry, October 2023.

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## CMS expands payment for dental services through Medicare

BY OLIVIA ANDERSON

**T**he Centers for Medicare & Medicaid Services issued the 2024 Medicare Physician Fee Schedule final rule, announcing that it will in the coming

year pay for dental services when they are linked and related to the success of other covered services like treatment for head and neck cancers. The payment rules will go into effect Jan. 1, 2024.

The ADA previously told CMS it supported the inclusion of the proposed rule's covered services, which were supplemented by clinical evidence. The services include the treatment of cancer through chemotherapy, chimeric antigen receptor T-cell therapy, and the use of high-dose bone modifying agents, or antiresorptive therapy, as well as for medically necessary diagnostic and treatment services

“

**The ADA would like to partner with CMS to develop an appropriate coding and payment methodology that addresses the shortcomings we have identified and accounts for the unique cost structure in dental offices.**

to eliminate oral/dental infections prior to or contemporaneously with such treatments. The ADA's comments also focused on the implementation of payment for dental services.

Regarding coverage of dental services that are linked to the success of medical procedures, the ADA appreciated CMS' recognition of the need to eliminate dental infection, but suggested that "without the subsequent replacement of teeth to facilitate the intake of nutrition, phonetics necessary for communication and social interaction, the patient is left crippled after certain medical procedures like surgical tumor removal."

The ADA urged CMS to "provide clear guidance to the Medicare Administrative Contractors that such services, although not directly related to 'elimination of dental infection,' should also be considered covered services."

In addition, the ADA suggested working with CMS to determine a more appropriate payment schedule for dental services.

"The ADA supports a defined scope of services necessary to complete a dentist prescribed treatment plan for the targeted population, who are highly vulnerable, to enable management of their medical condition and enhance their quality of life," the ADA said. "The ADA would like to partner with CMS to develop an appropriate coding and payment methodology that addresses the shortcomings we have identified and accounts for the unique cost structure in dental offices."

According to CMS, in February 2024 it will again accept public submissions for similar clinical scenarios with clinical analysis and evidence under which Medicare payment could cover dental services.

Follow all the ADA's advocacy efforts at [ADA.org/Advocacy](https://ada.org/Advocacy). ■

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# ADA signs joint letter urging passage of CHIPP Act

## Legislation would make Children's Health Insurance Program permanent

BY OLIVIA ANDERSON

The ADA previously signed onto a similar joint letter to Congress in the 117th Congress. ■



The ADA and 187 other federal, state and local groups signed a joint letter to Congressional leadership in support of the Children's Health Insurance Program Permanency Act, which would make the Children's Health Insurance Program permanent.

CHIP provides affordable health coverage to children in working families who earn too much money to qualify for Medicaid, but can't afford private insurance. It provides health care services like preventative care, vaccinations, dental, vision care and other necessary treatments.

The groups stated that CHIP has had a 25-plus-year impact on improving children's health outcomes, providing families with financial security and ensuring equitable access to health care.

The Nov. 7 letter highlights some of CHIP's contributions, such as reducing the number of uninsured children, safeguarding children's health, promoting prevention and early intervention, reducing health disparities, promoting academic success and relieving financial burden on families.

"The CHIPP Act secures access to quality, affordable health care coverage for millions of the nation's children, offering families stability and peace of mind while eliminating the fear and anxiety that arises with temporary funding extensions and the threat of the program's discontinuation," the letter reads.

The letter also said that making the CHIPP Act permanent is "long overdue" and would put it on par with other federal public health insurance programs. It goes on to say that Congress has "failed, as a body, to prioritize CHIP's permanence," noting that the legislation has faced repeated threats such as being vetoed twice and going unfunded for four months.

"Congress can put an end to the recurrent funding dilemma that stands in the way of securing millions of children's access to critical, life-saving coverage and care," the letter reads. "We urge you to prioritize the health and well-being of the nation's children by taking bold action to pass the CHIPP Act during the 118th Congress."

**“ Making the CHIPP Act permanent is ‘long overdue’ and would put it on par with other federal public health insurance programs. It goes on to say that Congress has ‘failed, as a body, to prioritize CHIP’s permanence.’ ”**

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# CISA releases cybersecurity toolkit for health care sector

## Resources could help protect dental practices

BY OLIVIA ANDERSON

Several government agencies have partnered to create a cybersecurity toolkit for the health care and public health sector, many elements of which will benefit dentists.

The Cybersecurity and Infrastructure Security Agency, the Department of Health and Human Services and the Health Sector Coordinating Council Cybersecurity Working Group are delivering tools, resources and trainings in order to help the health



care sector increase cybersecurity, an area in which many organizations are facing ongoing challenges.

According to CISA, the toolkit will help organizations “build their cybersecurity foundation and progress to implement more advanced, complex

tools to strengthen their defenses and stay ahead of current threats” as well as “proactively assess vulnerabilities and implement solutions.”

For dentists, several resources may be especially useful, including the cybersecurity education platform Knowledge on Demand. Knowledge on Demand offers five free cybersecurity trainings that align with the top five threats named in HHS’ Health Industry Cybersecurity Practices. Each training contains job aid, interactive videos, a PowerPoint presentation with notes and content intended for a learning management system.

Dentists are also encouraged to check out CISA’s Secure Your Business information sheet, which examines four ways to protect an organization from online threats: teaching employees to avoid phishing, requiring strong passwords, requiring multifactor authentication and updating business software.

Finally, dental providers should visit the Office of the National Coordinator for Health Information Technology’s Security Risk Assessment Tool, a resource designed to help medium and small providers conduct a security risk assessment as required by the Health Insurance Portability and Accountability Act. The desktop application will determine whether an organization is compliant with HIPAA’s administrative, physical and technical safeguards, as well as whether protected health information is at risk.

For more information, visit the CISA Health-care and Public Health Cybersecurity webpage. ■



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According to CISA, the toolkit will help organizations ‘build their cybersecurity foundation and progress to implement more advanced, complex tools to strengthen their defenses and stay ahead of current threats’ as well as ‘proactively assess vulnerabilities and implement solutions.’



# Dental apprenticeships aim to mitigate workforce challenges

## Training programs approved in Montana, Utah

BY OLIVIA ANDERSON

Dental organizations across the country are making moves to tackle the ongoing issue of workforce shortages through the implementation of dental assisting training and apprenticeships.

One of the programs spearheading this effort, Charter Apprenticeships, has already received state-level approval in Montana and Utah.



Mr. Reeder

According to Charter College New Business and Innovative Program Development Director Shane Reeder, the push for these programs has become increasingly vital. Charter has delivered career training in an academic model for more than 30 years and includes occupations such as medical assisting, nursing assisting and dental assisting.

But when the global COVID-19 pandemic hit, these professions saw significant disruptions in the workplace. Mr. Reeder said in 2018, about 5,700 first-year students were enrolled in dental assisting programs. By 2023, there were around 4,500 first-year students — a steady decrease over time of about 30%.

“There’s a natural demand decline, and some of that has to do with the cost of training relative to the wage, some of that had to do with COVID and [the thought] of, ‘Oh my gosh, if I work in health care I’m going to die,’” Mr. Reeder said. “That’s what’s caused us to think [about why] we need to do something differently, because status quo is not cutting it anymore.”

ADA Council on Government Affairs Chair Leigh Kent, D.D.S., said about 90% of dentists are running into staff recruitment and retainment challenges, which greatly affects the number of patients they can treat at any given time.

“It’s true everywhere, but it’s especially true in areas of most need,” Dr. Kent said. “I know it varies from region to region, but across the board, it’s really a national issue that we’re working hard on.”

According to Dr. Kent, most people tend to live close to where they trained. This means training more apprentices to work in areas of need will incentivize them to remain in those places afterward.

“That is going to help alleviate access to care because if dentists aren’t even able to work every day because they don’t have enough staff, or if they’re not able to work up to their full capacity, that’s affecting our patients’ ability to get treatment,” she said. “So these apprenticeship programs should help to relieve some of these barriers.”

In rethinking the general model for health care training, Mr. Reeder said a major goal was to land on a proportionate cost to earnings ratio. When training a dental hygienist, for instance, the earnings, requirement for licensure and cost should be more significant. But because wages for dental assistants are lower, the costs should be as well.

That’s how the dental assisting apprenticeship concept was born. Several years ago, Charter College approached the U.S. Department of Labor seeking national approval of the model, and although the labor department approved other similar proposals such as medical assisting and biomedical technician training, it did not approve dental assisting training.

“There’s a misperception versus a reality,” Mr. Reeder said of the denial. “There’s some perception of a disparity between states. I looked at the odd scope of practice some states have that is really not common, and there are only four states that make an on-the-job training model to get to full-scope dental assisting impossible or impracticable.”

These four states he said are Connecticut, Minnesota, Michigan and Massachusetts. Mr. Reeder noted one of the biggest challenges is obtaining a dental assistant certification from the Dental Assisting National Board. CDA certification can come from graduating from a school accredited by the Commission on Dental Accreditation. The next path to certification is through on-the-job training without general standardization, which requires 3,500 work hours.

But an apprenticeship sits somewhere between these two pathways. Because dental assisting programs include a structured training environment, there are typically about 2,000 hours of on-the-job training — which is 1,500 hours less than DANB’s CDA certification requirement.

“That’s one of the barriers that’s still out there with the USDOL, but DANB recently created [an entry level] certification that would tie into any on-the-job trained piece, and I’m going to get that back in front of the USDOL and say, ‘Let us get to this point, and then they can keep training and working to the 3,500 hour mark,’” Mr. Reeder said.

When it comes to what the dental apprenticeship program looks like, every apprentice is

expected to gain competency in five core areas: front office and scheduling; patient interaction; procedures and chairside assisting; sterilization, cleaning and stocking; and radiography. Each competency area is then broken down into specific demonstrated skills such as appointment scheduling, room setup and breakdown, rooming and vitals, preparing instruments, assisting during procedures, taking alginate impressions, placing rubber dams and barriers, coronal polishing, biohazard disposal and taking or processing X-rays.

There are currently 400 hours of curriculum, as well as a skills competency checklist that the dentist will evaluate halfway through the apprenticeship. While Mr. Reeder has expressed confidence in the program, he also acknowledged there is still much to be done before it’s completely off the ground.

“The USDOL doesn’t see the commonality, so I have to go state to state to state to get state-level approval,” Mr. Reeder said.

To date, Montana and Utah have approved the dental apprenticeships program. Once it has been approved in three states, the U.S. Department of Labor will further consider national approval.

Webb Brown, executive director of the Montana Dental Association, summed up the importance of dental apprenticeships in one word: demand. There is a higher need than ever for dental staff, Mr. Brown said, so crucial next steps include determining what his state “is going to require on one hand, and offer on the other hand,

[in order] to make this an attractive apprenticeship program.”

“People are just screaming for workforce. It doesn’t matter whether it’s dental assistants or dental hygienists or office managers,” Mr. Brown said. “Part of it is the opportunity to get a little buzz about a career in dentistry in general, and then here is something that provides a better pathway to be able to achieve that.”

Officials are still ironing out the details, from logistics to timeframe to the specific offset in wages, Mr. Brown said, but the process is underway.

“Apprenticeships are a great tool. On one hand, they’re a good way to determine the fit, just to make sure that you’ve got someone who likes the company and the profession that they’re an apprentice in. And on the other hand, a company that says, ‘Yeah, this person seems to be getting it and seems like they’ll be a valuable addition to the team.’ So we’re excited about that being available in the apprentice world,” Mr. Brown said.

In honor of National Apprenticeship Week in November, both Montana and Utah hosted an official signing ceremony. Leading up to the event, Mr. Brown and Utah Dental Association Executive Director Val Radmall gathered employers in support of the program, and at the ceremony, each one signed an agreement.

Mr. Reeder believes dental apprenticeships are a crystal-clear way to adapt to the ever-changing health care job market. For him, although the list of obstacles is still lengthy, so is the list of benefits to implementing these programs.

“It increases employee retention, you have uniformly trained employees, you have standardized training, office to office to office, you have someone else managing all the paperwork. It’s not as hard as it seems, and frankly, one of the really cool incentives is that most states have funding to pay wage offset for the apprentice,” he said. ■

## U.S. Preventive Services Task Force publishes final oral health recommendations

### Recommendations align with ADA’s previous comments

BY OLIVIA ANDERSON

The U.S. Preventive Services Task Force published its final recommendations about the value of oral health screenings in nondental settings for children and adults, which align with the ADA’s comments earlier this year.

For both asymptomatic adults and children ages 5 to 17, the task force stated that “the current evidence is insufficient” to recommend for or against routine screenings or preventive care for oral health conditions, such as dental caries, in the primary care setting.

“The USPSTF is calling for more research on addressing oral health in nondental primary care settings, particularly in persons who are more likely to experience oral health conditions and on social factors that contribute to disparities in oral health,” the task force said, adding that primary clinicians “should use their clinical expertise to decide whether to perform these services.”

The U.S. Preventive Services Task Force’s final recommendations are consistent with the ADA’s comments to the task force in June following a systematic evidence review to evaluate the benefits and harms of screening and preventive interventions for oral health conditions. The Association said in a letter that it “generally agree[s]” with the task force’s draft recommendation statement for oral health in children and adults.

“We would only point out that the evidence review demonstrated that screening and preventive interventions were beneficial when performed by dental care clinicians. Since routine dental care is an essential primary care service — and general and pediatric dentists are primary care clinicians — it may be worthwhile to highlight that point,” the ADA noted.

The final recommendation said that during the review, the task force found that preventive interventions are generally performed in dental settings by dental professionals and that there are barriers to providing oral health services in primary care settings such as additional training, specific equipment and reimbursement challenges.

“The USPSTF recognizes that clinical decisions involve more considerations than evidence alone. Clinicians should understand the evidence but individualize decision-making to the specific patient or situation,” the final statement reads. “Similarly, the USPSTF notes that policy and coverage decisions involve considerations in addition to the evidence of clinical benefits and harms.” ■







## December JADA looks at stem cells in dentistry

Cover story is latest in Oral Science Trends series

BY MARY BETH VERSACI

The future use of stem cell-based therapies in dentistry will depend on clinicians and researchers collaborating on projects to understand the safety, efficacy and feasibility of these

treatments, according to the cover story of the December issue of The Journal of the American Dental Association.

In “Stem Cells in Clinical Dentistry,” the authors discuss original data from experiments and comparative analyses and review articles describing the identification and characterization of stem

cells in the oral cavity. It is the latest addition to JADA’s Oral Science Trends series, made up of invited reviews that explain where current biomedical and clinical sciences are leading to impactful changes in dentists’ ability to provide care and improve health.

Dental stem cells self-renew to maintain a pool of cells that can be activated to replace terminally differentiated cells or enable wound healing, according to the article. These cells also can differentiate into functional blood vessels and nerves.

“Initial clinical trials have shown that transplanting dental pulp stem cells into disinfected necrotic teeth has allowed for the recovery of tooth vitality and vertical and horizontal root

growth in immature teeth with incomplete root formation,” the authors said in the article. “As a consequence of these groundbreaking discoveries, stem cell banks are now offering services for the cryopreservation of dental stem cells.”

To read the full JADA article online, visit JADA.ADA.org.

Other articles in the December issue of JADA discuss articaine use in the U.S., provider perspectives on pediatric pain management and dental care for emergency department patients.

Every month, JADA articles are published online at JADA.ADA.org in advance of the print publication. ADA members can access JADA content with their ADA username and password. ■



AROUND THE ADA

### Hertz deals available for members as 2024 arrives

**VEHICLES MUST BE BOOKED BETWEEN JAN. 1 AND 31, PICKED UP BY FEB. 29**

BY DAVID BURGER

ADA members can save up to 30% on Hertz rental cars — including electric vehicles — at the start of 2024.

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# ADA standards, technical reports available for comment

Deadline to respond is Dec. 31

BY MARY BETH VERSACI

New standards and technical reports are available for comment from the American Dental Association's Standards Committee on Dental Informatics and Standards Committee on Dental Products.

The Standards Committee on Dental Informatics has approved the following new standard for circulation and comment:

• **Proposed ADA Standard No. 1108 for Implementation Guidance for the ADA-HL7 Dental Health Functional Profile:** The standard identifies the minimum performance functionality required of an electronic dental record system and encourages the implementation of the ADA/HL7 Dental Health Functional Profile effectively in an interoperable and coordinated care environment. The purpose of the profile is to inform software developers, users, purchasers and payers of the desired performance of a dental electronic health record software system. The draft standard can be downloaded from ADA.org/aipreview.

The Standards Committee on Dental Products has approved the following new standards for circulation and comment:

• **Proposed ANSI/ADA Standard No. 206 for Dentistry — Implantable Materials for Bone Filling and Augmentation in Oral and Maxillofacial Surgery — Contents of a Technical File:** This standard applies to implantable materials used as dental devices for filling and augmenting bones in oral and maxillofacial surgery. Evaluation includes the physico-chemical, mechanical, biological and clinical aspects and behavior of these implantable dental materials. To review this standard, send a request to standards@ada.org.

To review this standard, send a request to standards@ada.org.

• **Proposed ADA Technical Report No. 189 for Photobiomodulation (PBM) in Oral Health: The Technology, Science, and Safety Considerations:** This technical report provides an overview of the photobiomodulation field,

including history, terminology, mechanisms, devices, safety, regulations and policy. The importance of fundamental concepts of photobiomodulation education and training focusing on light-tissue interactions, target tissue composition, evoked therapeutic biological responses, clinical diagnosis and rationalized dose prescription is emphasized. The draft standard can be downloaded from ADA.org/aipreview.

The ADA is accredited by the American National Standards Institute to develop national standards for products and information technology used by dental professionals and consumers. There are currently more than 130 national standards, and more are under development. ■



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**“The ADA is accredited by the American National Standards Institute to develop national standards for products and information technology.”**

• **Revised ANSI/ADA Standard No. 105 for Elastomeric Auxiliaries for Use in Orthodontics:** This standard specifies the requirements and test methods applicable to all elastomeric auxiliaries used for orthodontics, both inside and outside the mouth, in conjunction with fixed and removable appliances. To review this standard, send a request to standards@ada.org.

• **Proposed ANSI/ADA Standard No. 186 for Dentistry — Polymer-based Machinable Blanks:** This standard specifies the characteristics of polymer-based machinable blanks with respect to the milling process and provides the test methods that address the clinical issues specific to those materials.





# ADA continues to advocate for veterans' access to care as 2024 approaches

About 7.8 million veterans enrolled in the Veterans Affairs health care system — 85% — are ineligible for VA dental benefits

BY DAVID BURGER

When the father of Mark A. Vitale, D.M.D., died, his widow gave her son the Bronze Star that his father had been awarded decades before for bravery and heroism while risking his life in the Korean War.

Years later, when he was chair of the ADA Council on Government Affairs, Dr. Vitale was shocked to learn that most veterans, many of whom risked their own lives, were ineligible for dental benefits through the Veterans Affairs health care system.

His father had sacrificed greatly, and so had so many others. Dr. Vitale said it bothered him that those who served their countries didn't receive basic dental care when they came home. He made a commitment to change that.

As 2024 approaches, Dr. Vitale, the ADA and the ADA Foundation are committed to improving

veterans' access to oral health care though new initiatives — coupled with the ADA's efforts to address veterans' oral health care needs with lawmakers.

"The nation's dentists are proud to care for the oral health needs of those who have served our country so well," said ADA President Linda J. Edgar, D.D.S. "Doing so also requires the ADA to advocate tirelessly for improving veterans' access to dental care as a way to help them achieve optimal overall health."

While the Veterans Affairs health care system offers comprehensive dental care benefits to certain qualifying veterans — more than 600,000 veterans were provided dental care in the 2022 fiscal year — about 7.8 million veterans enrolled in the system — 85% — are ineligible for VA dental benefits.

Generally, to qualify for VA dental services, veterans must either have a dental issue that is service connected or based on other criteria

— for example, the veteran is a former prisoner of war or has a service connected disability rated as total.

VA Dentistry provides comprehensive dental care to qualifying veterans, and the VA celebrated One Million Strong Nov. 9 at the VA Central Office in Washington, D.C.

## GIVE VETERANS A SMILE

Well-suited to act as a national convener and potential collector and deliverer of data and resources relating to charitable oral health services for veterans, the ADA convened the first-of-its-kind Give Veterans A Smile Summit in May 2022. The day-and-a-half gathering highlighted the need to prioritize the delivery and access to care for veterans across the country.

The discussion items included gathering data for a national database of charitable veterans' oral health care programs; facilitating the sharing of best practices; fostering collaboration

among organizations/programs that provide care to veterans; and ultimately determining if there is a productive role the ADA can play in advancing access-to-care efforts for veterans.

Carol Gomez Summerhays, D.D.S., a veteran herself and past ADA president, chaired the summit. In her summit opening remarks to the attendees, Dr. Summerhays quoted President John F. Kennedy: "As we express our gratitude, we must never forget that the highest appreciation is not to utter words but to live by them."

Dr. Summerhays said that in addition to bringing to the table key stakeholder organizations focusing on veterans' care, the ADA wants to see if the Association's 21-year-old signature access-to-care program, Give Kids A Smile, could be used as a model for serving veterans.

The ADA Board of Trustees has demonstrated its continued enthusiasm about these nascent efforts through creating a Give Veterans A Smile National Advisory Committee to guide the development of a Give Veterans A Smile program and provide strategic advice with respect to matters of concern in the provision of care for veterans. The committee, chaired by Dr. Vitale, held its first meeting in April.

The committee's work is underway. To date, the proposed initial goals of the Give Veterans A Smile program, to be housed within the ADA Foundation, include:

- Shining a light on and calling national attention to the unmet dental needs of veterans.
- Encouraging dentists to provide pro bono oral health care services and dental homes to underserved veterans.
- Collaborating with and highlighting the good works of other organizations and programs providing overall health services to veterans.
- Collecting and sharing national charitable oral health care data for veterans to help guide advocacy efforts to increase funding and access to care for underserved veterans.

## ADA ADVOCACY

A policy, known as Resources for Veterans Ineligible for VA Dental Care, was adopted by the 2020 House of Delegates. It reads as follows:

"Resolved, that the American Dental Association supports the federal authorization of administrative support resources within the Veterans Administration Medical Centers to assist veterans to identify and utilize dental services offered by

See VETERANS, Page 16



Fellowship: Carol Gomez Summerhays, D.D.S., past ADA president and veteran, applauds a colleague during the ADA Give Veterans A Smile Summit at ADA Headquarters May 5, 2022.

## Dental Lifeline Network recruiting humanitarians to donate their services for veterans

Organization launching its 'Why I Dental' campaign, which encourages dentists to live their 'why' and do good together

BY DAVID BURGER

One hundred and seventy thousand people. Since its inception in 1985, Dental Lifeline Network has provided more than \$532 million in donated dental care, transforming the lives of nearly 170,000 people.

Through a volunteer network of 13,472 dentists and 3,315 laboratories, the network is thanking its current stable of humanitarians as well as continuing to recruit more to donate their services.

"I am proud to support Dental Lifeline Network. Quality oral health care is out of reach for so many," said Brett H. Kessler, D.D.S., ADA president-elect and a director at large for Dental Lifeline Network. "However, because of the generosity of volunteer dentists and laboratories, DLN is able to provide free, comprehensive dental treatment to vulnerable communities around the country, including veterans, people with disabilities, and those who are elderly or medically fragile. I am glad I can be of help to the program's success.

Right in time for the New Year, the network, led by Lynda Ricketson, president and CEO, is launching its "Why I Dental" campaign, which encourages dentists to live their "why" and do good together.



Connected: Andrew Wilcox, D.D.S., right, poses after treating a veteran, center, with one of his staff members. Dr. Wilcox cared for the patient through his participation with Dental Lifeline Network.

One of those dentists is Mark A. Vitale, D.M.D., who is the chair of the New Jersey Dental Political Action Committee and president of the New Jersey branch of Dental Lifeline Network.

Dr. Vitale's office treats two to three veterans a year who otherwise don't have dental care.

"It gives me a lot of satisfaction," Dr. Vitale said. "The level of appreciation we see is unbelievable. You can't not do it."

Another dentist who participates in the network is Andrew Wilcox, D.D.S., a general dentist in Minnesota, who treated an Army veteran, John. John suffers from a progressive neurological condition and hadn't seen a dentist for nearly a decade. His dental health needed serious attention.

After treatment, John's wife, Julie, said, "John and I are extremely happy and grateful that treatment has gone so well. We cannot thank [him] and the dental offices enough. Finally, John is able to smile again and is pain free, which is the most important. This has been a life-changing experience for him and our entire family."

To donate time or money, visit [dentallifeline.org](http://dentallifeline.org). ■



# Everyone for Veterans seeking dentists to provide pro bono care for nation's heroes

## Nonprofit connects veterans with comprehensive dental care

BY DAVID BURGER

The nonprofit access-to-care program Everyone for Veterans reports that since it has removed its combat veteran requirement and opened its programs to all eligible veterans across the country, there has been a 600% increase in applications seeking dental care.

Everyone for Veterans, founded by Theresa Cheng, D.D.S., a periodontist from Issaquah, Washington, and past recipient of the ADA Humanitarian Award, collaborates with civilians and professionals to provide goods, services and comprehensive dental care to veterans across the nation, at no cost to the veterans.

In the last five years, Everyone for Veterans has assisted more than 1,500 veterans and their families and has provided comprehensive dental care in 34 states.

"There are many dental programs going on around the country for Veterans Day," said Dr. Cheng. "Most of them are urgent need-based programs, which are wonderful, and our program complements them in veterans achieving oral health. Hence, it is very important for dentists to know our program and join us in our endeavor to promote oral health for veterans."

In 2008, Dr. Cheng started providing pro-bono dental care to combat veterans and their spouses in her clinic. She wanted to give back to the nation's veterans returning home from deployment and realized many did not receive dental benefits. It was formalized as a nonprofit organization in 2017.

"By seeing just one veteran a year in their office, [dentists] are helping to improve the oral and overall health of our nation's heroes and for that, we are beyond grateful," said Jessica Elwell, Everyone for Veterans executive director.

which were causing him pain, and had some other missing teeth. He was hoping to be able to smile again and chew his food more comfortably.

Everyone for Veterans connected Mr. Meyer to Dr. Whitney McBrayer, D.D.S., of W Dentistry in Lubbock, Texas. She provided multiple extractions as well as a full upper and lower denture.

After, Mr. Meyer shared that he is finally pain free and is able to smile more confidently.

"Dr. McBrayer has been an absolute pleasure to work with and be a patient of," he said. "I feel better about my health and about myself. I can smile now if I choose to without worrying about missing teeth."

Dr. McBrayer said, "Working with Nathan and Everyone for Veterans has been a very rewarding experience. First of all, Nathan is an inspiring, kind and heroic individual deserving of the benefits of this program and so much more. I've truly enjoyed getting to know him through our appointments, and I hope our friendship will continue long after we finish this process. Second of all, I'm so thankful to be involved with Everyone for Veterans because this is a truly worthy cause. I come from a military family and have always had the utmost respect, admiration and gratitude for our service members."

To learn more about Everyone for Veterans and consider signing up to provide care, visit [everyoneforveterans.org](http://everyoneforveterans.org). ■



Success: Nathan Meyer, left, smiles alongside Whitney McBrayer, D.D.S., who donated dental care to him through a connection with Everyone for Veterans.

One of those veterans is Nathan Meyer, who served in the Marines as a crew chief on a CH-53 helicopter. After he was discharged, he worked several odd jobs in welding, automotive and security, but due to a shoulder and spinal injury stemming from his time in the service, he was unable to work outside the home.

When Mr. Meyer came to Everyone for Veterans, he had some fractured upper front teeth,

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# Veterans Smile Day to 'serve those who've served'

## Annual event offers free dental care to military veterans

BY OLIVIA ANDERSON

When Deryck Pham, D.D.S., left the military in 2007, he spent hours undergoing exams and sifting through piles of exit paperwork. During the process, he chose medical, health and life insurance plans, but he couldn't find dental options anywhere. It quickly dawned on Dr. Pham that dental care was not included in his benefits package provided by the U.S. Department of Veterans Affairs, nor was it for almost anyone else not considered completely disabled without a service-connected condition. As both a veteran and a dentist, lack of access to dental care for veterans troubled him.

Not long after rejoining civilian life, an idea crept into his mind. Dr. Pham wanted to provide

free dental care to military veterans as a way to thank them for their service, while simultaneously spreading awareness about the lack of dental care for veterans across the country. The seedling idea eventually blossomed into what is now known as Veterans Smile Day.

"I knew when I actually became an owner of a practice that I was going to start this day of giving for veterans," Dr. Pham said. "That wasn't until 2012 when I became an owner, and I said, 'Okay, this year we're going to open up our doors on a Saturday and treat as many veterans as we can.' So that's how it started."

That first day, Dr. Pham's New Jersey private practice saw approximately 35 veterans. The following year, about 10 of his dentist friends also agreed to open their doors, and the year after that, more than 30 offices provided free dental care to

veterans. At that point, Dr. Pham decided to turn the annual event into a nationwide foundation that would raise funds and awareness, as well as recruit dentists, schools and hospitals to join.

The event has since evolved into something of a community event, with some locations offering blood pressure and glucose screenings, flu shots, COVID-19 shots, professional haircuts, massages and even raffles.

On the day of the event, usually on or around Veterans Day, veterans show up to a participating location and register on provided laptops. They are then given a number and complete both triage and a medical history assessment. From there, a dentist will take the necessary X-Rays and create a treatment plan, starting with the patient's chief complaint or urgent needs. Finally, the patients wait for an available doctor and ultimately receive customized care.

Karin Irani, D.D.S., co-founder of the Veterans Smile Day Foundation and member of the ADA Board of Trustees, said that the event consistently generates positive reviews from both veterans and doctors.

"I always get great feedback from both sides. The veterans are always so thankful – they're an amazing group, always so appreciative. And the doctors always feel really good [participating], because when you put them in touch with this group of people, they realize how humble [the veterans] are and the sacrifices they have made," she said.

According to Dr. Pham, many dentists are unaware that the VA doesn't offer dental care to most veterans. This is partly why the foundation's overarching mission is not only to provide dental services, but also to draw attention to the fight for veterans' access to oral health care.

"Veterans deserve better. Most dentists across the country don't know that veterans don't get that care from the VA, and that each dentist can actually help by treating one veteran, five veterans. It doesn't matter how many, just help," Dr. Pham said.

Dr. Irani, for example, was unaware that most veterans don't qualify for dental insurance until

Dr. Pham, who was her classmate at the University of Southern California School of Dentistry, told her about it in 2012. Generally, to qualify for VA dental services veterans must either have a dental issue that is service-connected or based on other criteria, such as being a former prisoner of war or having a disability rated as total.

According to the Pew Research Center, 13% of veterans were completely disabled in 2011, which means 87% of veterans did not receive dental benefits.

In 2021 the VA launched its VETSmile program, a pilot that works with community providers to improve dental care access for veterans who do not qualify for VA dental health benefits.

"Like many other regular people, I was not aware of it. I always thought veterans get the best health and dental and medical," Dr. Irani said.

Upon learning this, however, she immediately joined the cause by helping to create a name for the foundation and reaching out to sponsors such as Henry Schein, Ultradent and The Dentists Supply Company. Since those early days, Dr. Irani has delivered many presentations with various dental associations and advocated for legislation that supports access to oral health care for veterans.

Although the Veterans Smile Day Foundation has evolved significantly since it began, both Dr. Irani and Dr. Pham have high hopes for the future. Dr. Pham said he would like to see an official ADA service program for veterans – perhaps similar to the ADA Foundation's Give Kids A Smile program, which provides underserved children with free oral health care. "I think the ADA bringing attention to the issue would work on a greater spectrum, and also it would bring more doctors into the fold to participate, because people would hear more [about it] than [they do from] a small program like ours," Dr. Irani said.

Still, the mission of the program has always been and will continue to be in support of veterans, whether that be in small or large ways. It is, as Dr. Pham says, "to serve those who've served."

"Every time we help one veteran smile again, that's what we want. If we can get someone out of pain, that's awesome," Dr. Pham said. "If we can get another dentist to join and open up their doors, that's an accomplishment. It's almost like one brick at a time to really build a foundation."

For more information on Veterans Smile Day, visit [veteranssmileday.org](http://veteranssmileday.org). ■



Teamwork: Deryck Pham, D.D.S., second from left, and volunteers at the 2023 Annual Veterans Smile Day.



Service: Karin Irani, D.D.S., treats a veteran on Veterans Smile Day.

## VETERANS continued from Page 14

federally qualified health centers, not for profit dental care facilities, and volunteer dental professionals, and be it further resolved, that the ADA supports the work of component and constituent dental associations, dental organizations, societies and dentists to develop new programs with outreach strategies to assist veterans with unmet dental treatment needs, and to serve as a resource in finding dental homes for veterans."

In 2023, the ADA's government affairs laid the groundwork for a robust 2024 calendar of advocacy for veterans.

In a March 28 letter, the ADA urged Congress to provide additional funding and resources to the Department of Veterans Affairs Dentistry to meet the dental care needs of all eligible veterans.

Then-ADA President George R. Shepley, D.D.S., and Executive Director Raymond A. Cohlmiia, D.D.S., requested that Congress provide \$1.25 billion in fiscal year 2024 funding for VA Dentistry — \$50 million above the fiscal year 2023 enacted level — noting that "because funding and resources for VA Dentistry have not kept up with the increase in veterans eligible for VA dental benefits, real access to care is threatened by VA Dentistry's lack of funding and resources."

Drs. Shepley and Cohlmiia also asked Congress to set aside dedicated funding for VA Dentistry so that the money appropriated for VA Dentistry is not used elsewhere in the VA, and to restore

the appropriate executive authority of the head of VA Dentistry so that they can protect resources intended for dentistry.

In a September Action Alert, the ADA asked dentists to write to their congressional delegation and urge them to support improved access to dental care through increased resources for Department of Veterans Affairs Dentistry.

Increased funding for the under-resourced VA Dentistry would enable it to care for those already eligible for benefits, according to a September ADA Action Alert.

The VET CARE Act is a piece of legislation that would create a pilot program offering VA dental care to veterans with Type 2 diabetes as well as studying whether there is a correlation between receiving regular dental treatment and reduced complications of chronic disease.

"Many dentists are actively serving in the military or are veterans," according to the alert. "But did you know that while veterans' oral health is worse on average than non-veterans, only about 15% of veterans are eligible for VA dental benefits? More can, and must, be done to improve veterans' access to oral health care."

Visit [ADA.org/advocacy/legislative-action-center/vet-care-action-alert](http://ADA.org/advocacy/legislative-action-center/vet-care-action-alert) to take action by contacting your federal representatives.

Other ADA efforts to support veterans include:

- Entering into a memorandum of agreement with the VA's Center for Care and Payment Innovation to assist it in finding

partners for and promoting the VETSmile pilot program. VETSmile collaborates with community dental care partners to enhance veterans' access to dental services — often at a reduced cost — if they do not qualify for dental care through the VA. VETSmile also helps veterans to integrate oral hygiene practices into their daily lives in order to improve their overall health.

- Calling for improving the VA's ability to attract skilled professionals such as dentists, "an essential part of providing veterans with access to high-quality dental care," according to an Aug. 3, 2022, letter to Sen. Jon Tester, D-Mont., from then-ADA President Cesar R. Sabates, D.D.S., and Dr. Cohlmiia. In the letter, they highlighted VA Sec. Denis Richard McDonough's remarks that burnout and high demand for labor were responsible for "the worst turnover rate" in 15 years, noting the VA will need to hire 15,000 nurses over the next five years as a result. "At a time when 80% of dentists who are currently hiring are finding the recruitment of dental hygienists and assistants to be extremely or very challenging, VA must commit adequate resources to the VA dental workforce if it is going to meet the oral health needs of veterans," Drs. Sabates and Cohlmiia wrote. Follow the ADA's advocacy efforts at [ADA.org/advocacy](http://ADA.org/advocacy). For additional information on the ADA Foundation Give Veterans A Smile program currently in development email [gvas@ada.org](mailto:gvas@ada.org). ■

## New York State Dental Association steps up to care for underserved in state's Capital Region

BY DAVID BURGER

After the closure of several dental clinics in the metropolitan area surrounding Albany, New York, the New York State Dental Association stepped in Oct. 21 to host the Capital Region Community Dental Event to bridge the access-to-care gap.

It was a call-to-action partnership in New York state's capital with Hudson Valley Community College, Kare Mobile and the New York State Dental Foundation.

"Through these community dental events, NYSDA aims to break down barriers to better oral health and reach communities that historically struggle to access critical dental care," said Marlyce James, a registered dental hygienist who was heavily involved in planning the day of service. "My focus, as a community dental health coordinator will be care coordination and patient navigation to link patients to their new dental home and other resources within their community."

The event at Hudson Valley Community College is part of the association's Dental Demonstration Project, a state-funded initiative created in 2015 to improve oral health outcomes in underserved populations across New York State.

Through one-day service events and community outreach, the Dental Demonstration Project strives to close the gap on unmet dental needs, improve health literacy, connect patients to a dental home and link families to resources in their local community.

To date, more than 2,000 patients have received services from volunteer dentists at these type of events across New York state.

The Oct. 21 event featured dental professionals who provided dental screenings, emergency care for tooth pain and dental problems, oral cancer screenings, dental fluoride for cavity prevention and care coordination for finding dental care and insurance.

According to Grazia Yaeger, the association's director of marketing and communications more

than 4,000 patients, most of whom are Medicaid patients, have been displaced by the recent closure of dental clinics in New York's Capital Region, exacerbating the oral health care calamity in the area.

"Two dental clinics, Hometown Health Center in Schenectady and Whitney Young Health Dental Services in Albany, have emerged as lifelines for

some of the displaced patients," she said. "These clinics, already committed to serving our community, now face an influx of calls from patients desperate for a new dental home. Hometown Health receives an astounding 40-50 calls daily, with most patients seeking urgent care."

Betsy Bray, the association's director of health affairs, acknowledged the event is a small bannage, but still much-needed.

"We're in a workforce crisis," she said.

The goals of the event were to relieve pressure on Whitney Young and Hometown Health; relieve pain for community members by providing emergent dental care and a link to a new dentist; and foster interprofessional collaboration

and mentorship for dental hygiene and assisting students at Hudson Valley Community College.

"Unfortunately, access to dental care has been an ongoing challenge in underserved communities," said Greg Hill, association executive director. "Events like these provide opportunities for us to connect people with not only free immediate care, but options for them going forward. In addition to providing important dental services, it was equally important that we connected patients to dental homes for preventative, routine dental care."

Dental hygiene and assisting students from the college screened more than 120 patients at

See NYSDA, Page 18



Army of two: Lauren Heisinger, D.D.S., left, and Lydia Hunt, D.D.S., pose during the Oct. 21 Capital Region Community Dental Event.

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# Free posters, postcards available for approaching 2024 National Children’s Dental Health Month

BY DAVID BURGER

The theme of the American Dental Association 2024 National Children’s Dental Health Month is “Healthy Habits for Healthy Smiles!”

The February 2024 National Children’s Dental Health Month, promoted by the ADA, is a month-long national health observance that brings together thousands of professionals,

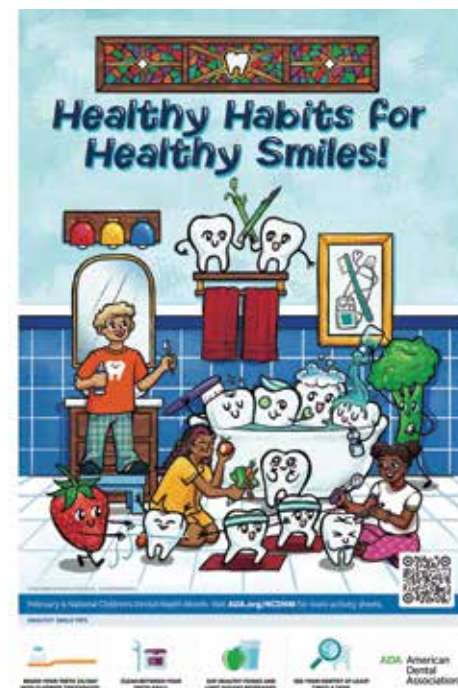
health care providers and educators to promote the benefits of good oral health to children, their caregivers, teachers and others.

Posters — 12”x18” — are free and come with English on the front and Spanish on the back. One pack contains five posters. Orders are limited to 40 packs.

The time between ordering and receiving posters may exceed 10 business days. Email [ncdhm@ada.org](mailto:ncdhm@ada.org) with questions or special requests.

Postcards bearing the posters’ art are also available at no cost. Postcards are 4”x6” and available in English and Spanish. One pack contains 25 postcards and orders are limited to 20 packs.

Additional materials, including a planning guide, publicity-generating resources, a coloring page, word search, crossword puzzle, and tooth-brushing calendar are available for download at [ADA.org/ncdhm](http://ADA.org/ncdhm).



“As a pediatric dentist and ADA Council on Advocacy for Access and Prevention member, I am proud to have the privilege of addressing the oral health needs of our pediatric population,” said Stephen Cochran, D.M.D. “We support parents taking their children to the dentist by their first birthday. Our goal is to promote a healthy oral care routine in order to maintain an excellent quality of life.” ■

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## NYSDA continued from Page 17



Service: A child receives a screening at the Capital Region Community Dental Event Oct. 21 in Albany, New York.

the event, and those who needed emergent care were referred to one of the two Kare Mobile dental vans onsite with volunteer dentists to care for patients.

Ms. Yaeger said, “The event sheds light on the transformative role of CDHCs in oral health care access to underserved communities. Ms. James will be working to follow up with the patients to ensure that they are connected to a new dental home.”

She added that next year the New York State Dental Foundation will embark on a pilot program that will bring CDHCs to the forefront of providing care in underserved New York communities, expanding on the work that has been done through the Dental Demonstration Project since its inception.

“This event is a great example of how CDHCs could be the missing link in bringing oral health care to our most vulnerable populations,” Ms. Yaeger said.

Elizabeth Whalen, M.D., Albany County Department of Health commissioner, said that there has been a “sharp decrease” in Albany-area providers who accept Medicaid. She characterized the situation as a “crisis.”

Albany Mayor Kathy Sheehan said, “We’re grateful whenever these events happen. It’s heartbreaking as well as heartwarming.” ■





Clinical Dentistry

BY MICHAEL G. NEWMAN, D.D.S.

*Editor's Note: The following coverage of the first Global Symposium on Artificial Intelligence is an example of what readers can expect from the PracticeUpdate Clinical Dentistry channel. PUCD offers free expertly curated updates from journals, news and educational resources around the world, filling gaps of knowledge in clinical dentistry and bridging oral health and the rest of health care.*

Experts at the first Global Symposium on Artificial Intelligence in Dentistry in November suggested AI integration with electronic dental records will improve the quality of clinical decision-making and patient outcomes.

"The use of AI to identify anatomy and disease from dental imaging, along with qualitative factors from medical histories and behavioral questions through the use of natural language processing, will make this workflow more quantitative and real-time," said ADA Past President Robert Faiella, D.M.D., who attended the symposium Nov. 3-4 at the Harvard University Science and Engineering Complex in Allston, Massachusetts.



Dr. Newman

Representing 21 countries, more than 300 clinicians, AI health care experts and commercial developers attended the meeting in-person and virtually to discuss emerging AI tools and their impact on oral health care.

According to Dr. Faiella, who chairs the ADA SCDI Working Group 13.8 on Artificial and Augmented Intelligence, electronic health records in the clinical setting will become the gateway for accessing the power of AI systems' ability to process large amounts of structured and unstructured data at the point of care.

The use of AI to ensure patient safety in monitoring drug interactions is already part of most electronic dental record systems. Future systems can improve prescriptions by looking for genetic markers that determine a patient's ability to utilize pain medications and antibiotics.

Presenters suggested technological advancements in AI are fast-tracking dentistry toward improved clinical practice.

"Artificial intelligence holds the promise of transforming the way we practice oral health care, pinpoint and treat diseases and conditions, and increase equitable access to care and treatment," said William V. Giannobile, D.D.S., D.M.Sc., dean and A. Lee Loomis Professor at the Harvard School of Dental Medicine.

During one session, Creighton University professor Takanari Miyamoto, D.D.S., Ph.D., and his colleagues presented a prototype of a fascinating virtual dental hygienist system. According to Dr. Miyamoto, The Digital Dental Hygienist is an AI-based app designed to enhance compliance in dental health care, especially for periodontal patients who depend on in-office visits but require motivation for home care. The data from the pilot study showed users had increased motivation and a reduction in plaque and gingival issues following improved compliance with dental recommendations.

Other topics covered during the two-day meeting included AI in temporomandibular disorders, orthodontics and oral surgery.

Several speakers demonstrated how AI is being used to augment traditional viewing. Notably, the

data generated from AI can be coded, stored and used for further processing. Several companies offer FDA-approved algorithms to assist the dentist.

"AI should help us advance patient care through improvement in diagnosis and risk assessment," said Michael McGuire, founder of PerioHealth Professionals and The McGuire Institute.

Attendees were generally pleased by the favorable assessment of AI's potential. From the

symposium presentations, it became clear AI can complement the clinician's decision-making and is not a replacement for the necessary personal connections at chairside.

"It is with great excitement that I look to AI to once again dramatically alter the way in which dentistry is practiced, increasing the quality of care and the ability to reach more patients who can benefit from everything dentistry has to

offer," said Jeanne Ambruster, CEO of The Avenues Company and industry consultant.

Learn more and subscribe for free to the Practice Update Clinical Dentistry channel at practiceupdate.com. The channel offers a customizable dashboard that includes abstracts, expert analysis, commentaries, news and other educational content, as well as regular email alerts to ensure dentists do not miss the latest in clinical dentistry content. ■



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<sup>1</sup> CareCredit Cardholder Engagement Study, conducted by Chadwick Martin Bailey on behalf of CareCredit, Q2 2021

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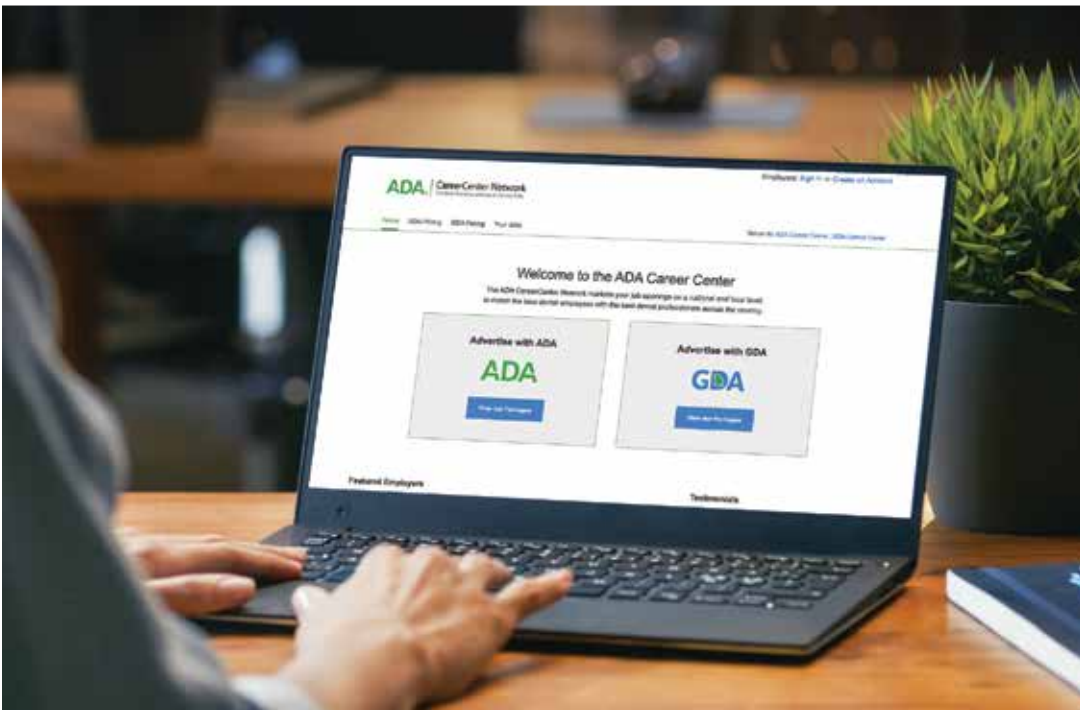
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# Get to know Marquette dental school

BY MARY BETH VERSACI

The U.S. boasts more than 70 accredited dental schools, all charged with educating the next generation of dentists. This series from the ADA News highlights facts about each to help paint a picture of the current dental education landscape.

From the year it was established to its total enrollment across all programs, learn more about the Marquette University School of Dentistry in the fact box below, and stay tuned for details about more schools in upcoming ADA News issues. ■



**Location:** Milwaukee  
**Year established:** 1894  
**Dean:** Elsbeth Kalenderian, D.D.S., Ph.D.  
**Total enrollment:** 436

**FUN FACT:**  
 The Marquette University School of Dentistry is **one of 11 dental schools in the U.S. with a Special Care Dentistry Association student chapter**, which was founded in 2014 and includes about 200 students.

*Next generation: The Marquette University School of Dentistry, Pierre Fauchard Academy and Wisconsin Dental Association host the 29th annual Mentor Program dinner in October. The nationally recognized program pairs a current dental student with a mentor dentist for networking and more.*

Photo courtesy of Marquette University School of Dentistry

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# ADA launches 2 new CE series focused on in-depth learning, networking

**New Dentist Learning Networks will empower younger dentists to shape profession's future**

BY MARY BETH VERSACI

Series and New Dentist Learning Networks, visit [ADA.org/CELive](http://ADA.org/CELive). ■



**D**entists looking to sharpen their clinical skills and grow their careers will have plenty of opportunities from the American Dental Association to learn and network in 2024.

Appropriate for both dentists and their teams, the new ADA Livestream Series will consist of longer, more in-depth courses designed to give participants the impact and comprehensiveness of an in-person course without the travel or time commitment.

Expert speakers will lead the presentations, with interactive discussions and Q&As to follow. Topics in early 2024 will include digital dentistry, infection control, implantology, opioid prescribing and more.

Courses will take place on Fridays and Saturdays, and participants will earn six continuing education credits per completed course. The series kicks off Jan. 26.

**“**  
**Courses will take place on Fridays and Saturdays, and participants will earn six continuing education credits per completed course. The series kicks off Jan. 26.**

Also new in 2024 are New Dentist Learning Networks. Crafted by new dentists and leading experts, the networks are designed to fulfill licensure CE requirements while bringing new dentists together and empowering them to shape the future of dentistry.

The networks are split up into two groups based on time zone, making them easy to fit into busy schedules. They meet online for 1.5 hours each month, leading up to an in-person capstone experience at SmileCon 2024 from Oct. 17-19 in New Orleans. Participants will earn 12 CE credits.

Each session will accommodate a maximum of 200 new dentists for personalized attention. Expert speakers will lead presentations, to be followed by interactive segments, including Q&As and case studies. Dedicated facilitators will manage the sessions and offline engagement to help foster information sharing and networking.

New Dentist Learning Networks starting in early 2024 include:

- LGBTQIA+ Identifying Providers.
  - Inventors and Entrepreneurs.
  - Next Gen ADA Speakers and CE Presenters.
  - Eco-Sustainable Practice.
  - Oral Surgery Skills for Female General Dentists.
  - LGBTQIA+ Patient-Centered Care.
- The first network launches Jan. 16.  
 To learn more or register for the ADA Livestream

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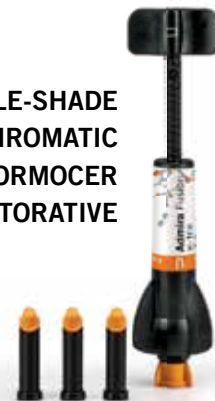
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