Student Debt

75% of Students Will Have More Than $100,000 of Debt

Also Inside ODC 2017, page 23  Member Spotlight: Sei Kim, DMD, page 24
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Membership Matters
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Membership Matters is an official publication of the Oregon Dental Association in support of its core purpose to advance the dental profession and promote the highest standard of oral health and oral health care.

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I ADMIT THAT I AM DISQUALIFIED FROM GIVING ECONOMIC ADVICE as I did, after all, purchase a home in November of 2007 which in hindsight was perfectly timed to be nearly at the height of the most recent housing bubble. As I look at the most recent statistics on student debt, I do hope that we are not in a similar situation when looking at the educational price of a dental degree. More importantly, is there anything that the ADA can do to help keep dental school a good investment for future doctors?

In a 2013 article in the *New England Journal of Medicine* (“Are We in a Medical Education Bubble Market?” Asch, Nicholson, Vujicic, *NEJM* 2013; 369:1973–1975), a medical school education, much like a dental school education, was discussed in terms of something that a student buys and then hopes to transform into “skills and credentials that are sold to patients in the form of services.” So long as patients keep paying more for patient services than students will be willing to pay more for their education. The authors suggest that one way to measure the market economy is to look at the ratio of the student’s debt to the average annual income they will be earning. As one can imagine this ratio has been climbing over the past 10 years as dental income has been flat and is not expected to increase.

Only 11% of dental students graduate without any debt, and 1 in 5 graduate with less than $100,000. For the class of 2014, the average debt of those graduating with debt was approaching $290,000 for students in private state-related schools. As that number is just the average, it means that many students are graduating with debts over $400,000 after just four years of school. According to ADEA, 30% of indebted students graduate with over $300,000 in debt. Statistics for students that enter specialty programs are unavailable, but one can do simple arithmetic to figure out the additional debt that they take on. The bottom line is that the actual student debt for most students is much greater than the frequently quoted “average” of $220,000.

Compounding the economics of the dental marketplace is that we are at an all-time high for dental school enrollment. There are currently over 23,500 students enrolled in dental school programs. The last peak for dental school enrollment was in 1981. Over the past 10 years, there have been 10 new dental schools that have opened and there will be a new school opening in Texas in 2020. This new supply in dentists is growing faster than the patient population.

It should be of some concern that when we look at all these factors combined together a dental school education looks riskier and riskier. A potential dental student doing all the research would see a profession in which the supply of doctors is increasing in a marketplace in which patients are utilizing services less and doctors’ income is stagnant. It is easy to compare it to the housing market in 2006.

For the class of 2014, the average debt of those graduating with debt was approaching $290,000 for students in private state-related schools.

Most of these contributing factors are out of the control of what the ADA can effectively control. So the ADA is focusing their efforts on revising the Higher Education Act of 1965, “which provides the statutory authority for most federal student loan programs to operate, including those most widely used by dental students” (www.ada.org). In addition to advocating for lowering federal graduate loan interest rates and enabling federal student loans to be refinanced more than once, the ADA is also advocating “removing the barriers that prohibit those with private graduate student loans from taking advantage of federal student loan forgiveness/service payback programs.”
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Please send all other events to Cassie, cleone@oregondental.org.

September 2016

**Continuing Ed., 2 Hr: “Oregon Board of Dentistry: All You Need to Know,”**
Presented by Stephen Prisby, Exec. Dir.
Wed, Sept 21, OHSU School of Dentistry, Portland. Info: www.multnomahdental.org or lora@multnomahdental.org

**ODA Board of Trustees Meeting:**
Fri, Sept 30, Embassy Suites, Portland. Info: 503-218-2010

October 2016

**ODA House of Delegates:** Oct 7-8, DoubleTree By Hilton Hotel, Portland. Info: 503-218-2010

**October 2016, cont…**

**Continuing Ed., 1.5 Hr: “Clinicopathologic Correlation in Oral & Maxillofacial Pathology,”** Presented by Nasser Said-Al-Naief, DDS, MS. Tues, Oct 11, Roth’s, Salem. Info: Sabrina H. at mpdentalce@qwestoffice.net

**DFO Committee Meetings:** Fri, Oct 14, Wilsonville, Oregon

**ODA Board of Trustees Meeting:**
Fri, Nov 4, ODA Office, Wilsonville. Info: 503-218-2010

**Continuing Ed., 1.5 Hr: “Accurate Recordkeeping for the Dental Office,”** Presented by Stephen J. Persichetti DDS, MBA. Thurs, Nov 3, Lane County Community College, Eugene. Info: www.lanedentalsociety.org or office@lanedentalsociety.org

**ODA Board of Trustees Meeting:**
Fri, Nov 4, ODA Office, Wilsonville. Info: 503-218-2010

**Continuing Ed., 1.5 Hr: “Disclosure Time Reduction & TMD,”** Presented by Ben Sutter, DMD, FAGD. Tues, Nov 8, Roth’s, Salem. Info: Sabrina H. at mpdentalce@qwestoffice.net

**Oregon Board of Dentistry—Board Meeting:** Fri, Oct 21, 1500 SW 1st Ave, 7th Floor Conference Room, Portland. Info: www.oregon.gov/dentistry/Pages/brd_agendas.aspx

**ODA Board of Trustees Meeting:**
Fri, Nov 4, ODA Office, Wilsonville. Info: 503-218-2010

**Continuing Ed., 2 Hr: “TMD From a Physical Therapist’s POV,”** Presented by Sarah Stuhr, RPT. Wed, Oct 19, TBD. Info: www.multnomahdental.org or lora@multnomahdental.org

**October 2016, cont...**

**Continuing Ed., 2 Hr: “TMD From a Physical Therapist’s POY,”** Presented by Sarah Stuhr, RPT. Wed, Oct 19, TBD. Info: www.multnomahdental.org or lora@multnomahdental.org

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**ODA Board of Trustees Meeting:**
Fri, Nov 4, ODA Office, Wilsonville. Info: 503-218-2010

**Continuing Ed., 2 Hr: “HIPAA, OSHA Compliance & Employment Law,”** Presented by Chris Verbiest & Team. Wed, Nov 16, Moda Plaza, Milwaukie. Info: www.multnomahdental.org or lora@multnomahdental.org

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Find this calendar online at www.oregondental.org. Click ‘Meetings & Events’ > ‘Calendar of Events’.
Board Highlights

Friday July 22, 2016

- Dr. Nalani Oda and Dr. Calie Roa were appointed to the New Dentist Council.
- The 2017 ODA budget was reviewed and approved.
- The Board voted to bring forth a resolution to the 2016 House of Delegates for their endorsement of the ADA CDHC Program in Oregon.

Nominations are now open for the following offices, to be elected by the ODA House of Delegates, Oct. 7.

- **LDC**
  (three positions, 3-year term)
  DECLARED CANDIDATE: Weston W. Heringer, Jr., DMD, Marion and Polk Dental Society

- **BOT At-Large Member**
  (three positions, 4-year term)
  DECLARED CANDIDATE: Deborah Struckmeier, DMD, Multnomah and Sarah Post, DMD, Lane

- **Speaker of the House**
  (3-year term)

- **Editor**
  (3-year term)
  DECLARED CANDIDATE: Barry Taylor, DMD, FAGD, FAD, CDE, Multnomah

All ODA members are encouraged to participate in the leadership of this organization. For more information about any of these positions, call 503-218-2010 or email cleone@oregondental.org.

Interested applicants should submit a letter of interest and a one-page resume. Email your materials to leadership@oregondental.org, or mail to:
ODA Leadership Development Committee
Jim Smith, DMD, Chair
Nominating Sub-Committee
8699 SW Sun Pl, Wilsonville OR 97070

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Sarah Post, DMD, Lane County
Deborah Struckmeier, DMD, Multnomah
Frances Sunseri, DMD, MAGD, Clackamas County

**ADA DELEGATES AT LARGE**
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Hai Pham, DMD, Washington County

**OHSU-ASDA REPRESENTATIVE**
Michelle Crabtree, DS3

**NON-VOTING MEMBERS**
Speaker of the House
Barry Taylor, DMD, CDE, Multnomah, Editor
Join the Molar Movement #FightEnamelCruelty

For the last two years, the Molar Movement has had a presence at the American Student Dental Association Annual Session. Last year in Boston, the Molar Movement Scarf found its way through the Portland International Airport to Boston and this year the Oregon Health & Science University students brought Molar Movement sunglasses to Dallas!

For more information, or to email your photo to us, contact ODA Membership Manager Kristen Andrews at 503-218-2010 x110 or kandrews@oregondental.org.

Welcome New ODA Members!

- Jared R. Adams, DDS
  Central Oregon Dental Society
- Paul A. Brannen, DMD
  Marion and Polk Dental Society
- Kyle J. Frisinger, DMD
  Central Oregon Dental Society
- Erin K. Johnson, DDS
  Lane County Dental Society
- Erin Lange, DMD
  Marion and Polk Dental Society
- Michael L. McCunniff, DDS
  Lane County Dental Society
- Alexander D. Snyder, DDS
  Washington County Dental Society
- Steven J. Worley, DDS
  Marion and Polk Dental Society

The ODA House of Delegates is moving!

October 7 – 8 | Double Tree by Hilton Hotel, Portland

We’ll be right here in October. Join us!

Contact your local component society if you are interested in becoming a delegate!
Mark Miller DMD MAGD (Carlton)

“I really appreciated Gary’s experience and candor. He is a great person to work with. The transition went very smoothly. I would not change a thing even if we did it all over again.”

Gary Schaub

“I marketed Dr. Miller’s practice as a general practice for sale in the heart of wine country. There was a lot of interest because of that, plus the practice was very successful. In addition, it was in a beautiful stand-alone building in the center of Carlton. Unfortunately, the first buyer backed out at the last moment, but that was good since Drs. Kolts and Zollinger ended up being perfect buyers. I really enjoyed working with Dr. Miller due to his sense of humor, fairness, and patient orientation.”

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“My results with WEO Media have been better than I had anticipated. It’s less expensive per month than I was paying. The results are better for me because of their outstanding SEO and online marketing. I would highly recommend WEO Media to any practice that wants to expand their internet presence.”

- Mike Regan, DMD
Milwaukie, OR

“We were using another company to do our website and online marketing and felt we may be paying too much, and not getting good service. We switched to WEO Media and are really glad we did — it’s been a night and day difference. Their customer service has been OUTSTANDING! We really value their deep expertise and knowledge of the dental industry as well. We are very happy with the website, and other marketing services. They have been wonderful to work with. Thanks WEO!”

- Laura Matin, DDS
Portland, OR
What is the new 1557 rule that protects individuals from discrimination under the Affordable Care Act (ACA), who will be affected, and what resources are there to be compliant?

The Department of Health and Human Services (HHS) published a new ruling, Section 1557, under the ACA, effective July 18. Covered entities that must comply are:

- Dentists and dental practices that receive payments from HHS for; Medicaid, Children’s Health Insurance Program (CHIP), or “meaningful use” payments under the Medicare and Medicaid Electronic Health Records Incentive Program.

Dental providers that fall into the covered entities category are mandated by HHS to post two types of notices:

- A notice of nondiscrimination
- Taglines in the top 15 non-English languages spoken in Oregon

Section 1557 does not apply to dentists or dental practices who only accept reimbursement under Medicare Part B, including Durable Medical Equipment (DME) that is reimbursed under Part B. OCR did clarify that the final rule does apply to any provider who received reimbursement for Medicare Part C, Medicare Advantage, regardless of whether the plan reimburses the dentist or the patient.

For more information

Resources, notices and taglines can be found at the ADA Center for Professional Success, and the Department of Health & Human Services:

- www.hhs.gov/civil-rights/for-individuals/section-1557/index.html

Presenters Guide:

This column is intended to help you to be better informed of the rules and regulations that are required of running a dental practice in Oregon.
ON SATURDAY, JULY 9, THE ODA NEW DENTIST COUNCIL held its first continuing education program designed specifically for new dentists and students. With over thirty attendees, the Symposium program included practice management and clinical courses provided by ODA partners, Alexandra Iosif and CJ Williams of Bank of America Practice Solutions and ODA members Michelle Stafford, DDS, Barry Taylor, DMD, and Caroline DeVincenzi, DMD. 📸

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Student Loans Affect How Many New Dentists Build a Practice

“I CALL IT MY VACATION HOUSE,” jokes Daniel Miller, DMD. Miller, who finished dental school in 2011, is a general dentist and the current president of the Clackamas County Dental Society. His “vacation house” is actually his educational debt: his monthly loan payments are significantly bigger than his mortgage.

Miller is not atypical of young dentists. In recent years, the crisis of student debt has reached dizzying proportions. By 2015, Americans had accumulated over $1 trillion in debt to fund undergraduate and graduate education, and though it is “good” debt, it is expensive. Most student loans cannot be discharged through bankruptcy, and interest rates are much higher than mortgage rates. With educational costs rising, the challenge of helping young people manage their loans has become a political issue.

The largest share of student loans goes to medical professionals, and dentists’ average student loan burden is the highest of those. The American Dental Education Association (ADEA) estimates the average debt for dental students with loans in the class of 2015 was $255,567, continuing a multi-year trend of steep increases.¹

The magnitude of the problem surprises older dentists, many of whom worked their way through dental school and graduated debt-free and ready to buy a practice. Some assume that students bring the problem on themselves; loans are voluntary, and many students make the mistake borrowing more than they need. With an average starting salary of $140,000,² dentists are highly-enough compensated that the recent graduate drowning in debt may not be sympathetic. But borrowing is a response to rising costs, and sympathetic or not, when dentists start professional life with significant debt, it poses problems for the entire profession to address.

A sharp cost increase
Dental education costs have increased rapidly in the last decade. The ADA Health Policy Institute (ADA HPI) has analyzed trends in dental school finances, and points to a few key factors.³ Nationwide, state and local support for public dental schools dropped from 25% to 17.5% from 2004 to 2014. As state funds declined, tuition and fees at public dental schools have increased to about 25% of total funding in 2014, up from 13.7% in 2004.

For 2016–2017, OHSU’s first-year, out-of-state tuition and fees are nearly $87,000 for four terms. Add in OHSU’s estimated cost of living at $21,000 per year, and it is clear how debt might pile up.⁴ Factor in year-round curriculum and limited paid summer work, and it is even clearer why the ADEA estimates 90% of dental students graduate with some debt.

Ripple effects
Debt is driving some workforce trends: many young dentists decide what kind of practice to pursue while weighted down by huge monthly debt payments. Buying a practice outright, or setting up in a small town or rural community, seem virtually impossible. Vanessa Peterson, DDS, MS, continues

The Average Dental Student Graduates with $241,097 of Debt

<table>
<thead>
<tr>
<th></th>
<th>Average Yearly Tuition</th>
</tr>
</thead>
<tbody>
<tr>
<td>In State</td>
<td>$38,826</td>
</tr>
<tr>
<td>Out of State</td>
<td>$53,774</td>
</tr>
</tbody>
</table>

75% of Students Will Have More Than $100,000 Of Debt

Source: 2013 ADEA Deans’ Briefing Book & 2014 Annual Session Student Debt Presentation
described her experience in choosing a practice. “We’re taught during school and residency that buying a practice and getting those loans for private practice is still the best idea. It’s not easy to accomplish that; you see group practices growing, and it’s a little scary to see all this consolidation in the market and think about opening a practice.”

Student Debt has Doubled Since 2001

Practice patterns also affect patient access. Oregon’s Medicaid patients have significant unmet dental needs, especially in rural areas. The state is exploring pilot programs including dental health aid therapists (DHAT) to meet those needs, though these therapists cannot provide full-spectrum care. With reimbursement rates declining and rural economies stagnating, the barriers to establishing an independent rural dental practice are significant, and debt should not be one of those barriers. With nearly one million Oregonians living in designated dental health professional shortage areas, it is critical to use programs and policies to help get dentists where patients are.

Debt notwithstanding, many new dentists have an entrepreneurial spirit. Olesya Salathe, DMD, a family dentist in Molalla, chose that path when she started practice in 2010.

Dr. Salathe, who heads the ODA New Dentist Council, bought into the small-town practice where she had worked sterilizing instruments as a teenager; within a year, she bought out her partner. Salathe took on significant financial risks, because she could see...
the opportunity to increase profitability in the practice. She is comfortable with that risk, though she recognizes not everyone would be. “I haven’t paid off my loans yet, but what I did choose to invest in was my private practice, and grow it, and now I have a lot of equity in my practice. I could use that to pay off my loans, but we’re choosing to invest in the practice even more,” she said. At this stage, she feels her ability to expand is tempered not by her own debt obligations, but because any young dentist she would take on would need enough patient volume to support their own debt service obligations. Growing her practice to that point is a challenge.

As a solo practitioner, Salathe is fortunate, and perhaps unusual among her peers. With other economic pressures, from demographic shifts to payer and consumer trends, the future of private practice in the dental industry is unclear. Dental economics estimated recently that 44% of new private practitioners were in corporate practice from 2007–2009; while this varies by state, the trend is likely to increase over time. Retiring dentists who want to sell their practices may soon find it difficult to find individual buyers.

Raising the alarm together
As recent dental graduates gain their footing professionally, their voices, and the voices of dental students, are calling for significant reform to dental education financing.

Numerous state and federal repayment-assistance programs do exist, and these may meet the needs of many who are working to find a way to manage their finances long term, but many feel these options cannot be allowed to be a substitute for bolder action. The American Student Dental Association (ASDA), for example, lobbies to reduce the cost of education through expanded state funding support for dental education, and expanding existing scholarships, and reduced interest rates in addition to loan forgiveness programs.

The support of the wider dental community would help amplify their voices. According to Miller, solutions depend on united action by the dental community. “The bigger you are, the louder you are, and you get people paying attention. Nobody by themselves can have enough influence to get attention,” he said.

Eddie Ramirez, president of the OHSU ASDA, and member of the class of 2018, cites the need for better information. “At most pre-dental events they always talk about the cost of dental school, and how to cover it with loans. More students are being educated, but do not know what the ‘consequences’ of being 250,000+ in debt will mean. Students should be

continues
Educated on how to better manage their debt over the course of four years,” he said. Expanded financial education and support from dental schools is essential.

**Expanding available tools**

While activists pursue reform, organized dentistry can also help young dentists through connections and targeted member benefits. Component societies can help new dentists settle in their local community. Some, like Clackamas county, offer reduced or no dues for first-year dentists, and provide networking and educational events, sometimes on financial topics that let dentists exchange wisdom about how to cope with the struggles of new practice.

ODA members have access to debt refinancing services through SoFi, a San Francisco based peer-to-peer lender which helps dental and medical professionals consolidate and manage their debt payments. Nisha Choksi of SoFi said that even small reductions in interest rates can result in tens of thousands of dollars of savings over the life of a loan. The ADA has a similar benefit through an exclusive relationship with Darien Rowayton Bank.

The right path out of debt will vary among dentists; income-based repayment programs may work for some, while service-based forgiveness programs will work for others. Salathe and Peterson both recommend taking the time between graduation and licensure to figure out the best options for a particular situation, and taking action without delay. Peterson and her husband, also a dentist, have enrolled in the REPAYE program launched in 2015.

The collective burden of student debt is a real threat to the profession. When new dentists can make choices with confidence that their debt is manageable, and pursue a practice that meets their ambitions, communities get better care. Through advocacy, all dentists can have a role in securing that possibility. ☝️

Betsy Boyd-Flynn worked in medical associations for 14 years as a communicator and executive. She writes articles for associations as a freelancer in her spare time. She can be reached at bboydflynn@gmail.com.

**END NOTES**

1. www.adea.org/GoDental/Money_Matters/Educational_Debt.aspx
3. www.ada.org/~/media/ADA/Science%20and%20Research/HPI/Fies/HPIgraphic_0416_2.pdf?la=en
5. datawarehouse.hrsa.gov/Tools/HDWReports/Reports.aspx
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At-Large Board Member Candidates

WESTON HERINGER JR., DMD

PRACTICE LOCATION: Retired after practicing in Salem for 31 years, worked in a Lincoln City satellite for 27 years and service as a Tooth Taxi dentist for two years.

HOMETOWN: McMinnville

DENTAL SCHOOL: OHSU School of Dentistry (1971)

HOBBIES/ACTIVITIES: Grandchildren, bay crabbing and rock collecting

Why are you seeking this position? I have served before and feel my past experience and leadership skills benefit the Leadership Development Committee.

What do you think the ODA needs to do to encourage more members to volunteer? We need to continually educate ODA members about the importance of the ODA, and what we do to keep dentistry alive and vital to the good health of Oregonians.

What do you see as the main issue(s) the ODA must address over the next few years? We need to develop strong leaders and provide good candidates for the Moda Health Board of Directors.

SARAH P. POST, DMD

PRACTICE LOCATION: All over Oregon: I’m a traveling pediatric dentist for Advantage Dental Clinics, helping the highest risk patients across the state of Oregon.

HOMETOWN: McMinnville

DENTAL SCHOOL: OHSU School of Dentistry (2012), Doernbecher Children’s Hospital pediatric dental residency (2015)

HOBBIES/ACTIVITIES: Running (excited to be doing the New York Marathon this November), swimming, playing piano, hiking, traveling, and spending time with my wonderful husband

Why are you seeking this position? I have been lucky enough to sit on the Oregon Board of Trustees since February 2016 and have very much enjoyed the experience. I’m eager to continue being a member and continue growing with the board as I learn and contribute more to the relationships the ODA holds and helping make decisions for the dental profession in Oregon. I have learned a lot about the “behind the scenes” functioning of the ODA as well as the ADA by being an alternate delegate at the ADA in Denver this fall. I feel I have a very unique and helpful perspective to bring to the table as I am constantly exposed to and treating a variety of patients in many clinics across the state of Oregon. I practiced as a general dentist prior to going back and doing a residency in pediatrics and feel that also helps me see and understand the big picture of the ODA’s mission.

What do you think the ODA needs to do to encourage more members to volunteer? I think people are willing to volunteer their time most easily for things they feel emotionally connected to, when they feel like their time is valued, and when they are recognized for their efforts—things as simple as “we’re so glad you’re here!” I think having a variety of volunteer options, open communication about volunteer opportunities and recognition all encourage members to help. I also believe that leading by example is a golden way to encourage and retain others. (Doesn’t hurt to have plenty of snacks and coffee either!)

What do you see as the main issue(s) the ODA must address over the next few years? Continue working to improve access to care to those most in need and continue to provide a strong support group for the future of dentistry and dentists in Oregon.
Deborah Struckmeier, DMD

**PRACTICE LOCATION:** Portland

**HOMETOWN:** Portland

**DENTAL SCHOOL:** OHSU School of Dentistry (1996)

**HOBBIES/ACTIVITIES:** Reading, traveling and working on photo albums

**Why are you seeking this position?** I’ve been involved with organized dentistry since dental school, and that introduction in dental school taught me the value of organized dentistry. I’ve also been involved with the Multnomah County component and I’ve served as a delegate to the ODA House of Delegates nearly every year since 1996. I decided I wanted to do more at the state level.

**What do you think the ODA needs to do to encourage more members to volunteer?** I think the most valuable way to get people involved is that personal touch, like talking to friends or giving someone a phone call to ask them to volunteer. Sometimes people just don’t understand what they are volunteering for is all about, so that personal touch is a good springboard to educate people and get them involved.

**What do you see as the main issue(s) the ODA must address over the next few years?** I think the ODA should continue to strengthen its relationship with the Oregon Board of Dentistry and keep things moving in a positive direction that way.

Barry J. Taylor, DMD, FAGD, FACD, CDE

**PRACTICE LOCATION:** OHSU School of Dentistry

**HOMETOWN:** Portland

**DENTAL SCHOOL:** OHSU School of Dentistry (1995)

**HOBBIES/ACTIVITIES:** Music, outdoor activities

**Why are you seeking this position?** I enjoy serving as the Editor for the ODA because it allows me to be involved in organized dentistry in a manner in which I can be the observer and share my perspective on current issues. With a background in private practice, managed care, and now education, I believe I bring a well-rounded perspective to our profession.

**What do you think the ODA needs to do to encourage more members to volunteer?** Members need to be aware that they can make significant changes to the profession by volunteering. Oregon is a small state in which an individual can truly make a difference. We also have to make sure it is rewarding and fun to volunteer so that members enjoy the experience.

**What do you see as the main issue(s) the ODA must address over the next few years?** We must stay relevant in a changing market place. Not only are the practice models changing, but also the doctors are changing in what they are looking for in an organization. Individuals still join organizations, but they have different expectations of an organization versus what members expected 20 years ago. Dentists don’t feel any obligation to join an association but they will join if they see the value of the association.

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**HOUSE OF DELEGATES HIGHLIGHTS**

- Address by ADA President-Elect, Gary Roberts, DDS
- Appointment of new officers and leadership
- Oregon Mission of Mercy Task Force update and discussion
- Election of Trustees, Leadership Development Committee members, Editor, and Speaker of the House
- Mega-issue discussion on the “Future of Dentistry” with Marko Vujicic, from the ADA Health Policy Institute

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**At-Large Board Member Candidates**
Drs. Saucy and Heringer Walk the Political Walk

DR. WESTON HERINGER AND DR. DANIEL SAUCY participated in U.S. Representative Kurt Schrader’s (D-OR 5th Congressional District) annual “farm bar-b-cue” fundraiser. In addition to delivering a campaign contribution from ADA, Drs. Saucy and Heringer kicked in personal contributions of their own. (Federal candidate committees can only accept personal contributions or political action committee (PAC) contributions sourced from personal funds; corporate and union contributions are not allowed).

While at the western themed event, Drs. Saucy and Heringer had an opportunity to discuss challenges facing Oregon dentists with Congressman Schrader, including large student debt and small business issues. As a veterinarian, Rep. Schrader conveyed his understanding of office overhead, patient relations, healthcare reform, disease prevention and many other issues facing dentists. Because of the many meetings, Schrader recognizes Drs. Heringer and Saucy as reliable and credible representatives of Oregon’s dental profession.

If you’re interested in getting involved in legislative, regulatory or electoral advocacy, contact Ken Yates, ODA Director of Government Affairs, at 1-800-452-5628 or kyates@oregondental.org.

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Ken Hargreaves, DDS, PhD
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Ginny Jorgensen, CDA, EFDA
Infection Control/Health & Wellness

Jim Kessler, DDS
Restorative Dentistry

Tieraona Low Dog, MD
Health & Wellness

Sanjay Mallya, BDS, MDS, PhD
Radiology

Jay Malmquist, DMD & Michael Malmquist, DMD
Implants

Samson Ng, DMD, MSc
Oral Pathology

Shannon Pace Brinker, CDA, CDD
Assisting

Peter Pizzi, CDT, MDT, FNGS
Restorative Dentistry

Lisa Marie Spradley
Communications

Rebecca Wilder, RDH, MS
Hygiene

Michael Wiseman, DDS
Geriatric Dentistry

Juan Yepes, DDS, MD, MPH, MS, DrPH
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THE IMPORTANCE OF GOOD ORAL HEALTH to a person’s physical well-being as well as their confidence was underscored for Sei “Chanel” Kim, DMD, when she was on a service trip to Cambodia as a teenager.

She had befriended a Cambodian girl who told Kim she couldn’t bear to show her smile because she didn’t like the way her teeth looked. The experience helped spark Kim’s interest in dentistry as a career that could impact people in a profound way.

“As a young kid that experience was eye-opening,” said Kim, who was raised in Happy Valley, east of Portland. “I’ve always had regular dental care, and it’s something I personally took for granted. I’ve lived a very lucky life in that sense. But (access to good oral health care) truly can be life-changing, and to have that skillset to provide that service, it’s a pretty cool thing.”

Fast forward to 2016. Kim, who has already had a stint as an assistant with the Tooth Taxi, graduated in May from Western University of Health Sciences in Pomona, Calif., and in July began studying for a career in periodontics through the Oregon Health & Science University School of Dentistry’s Advanced Education Program in Periodontics.

Kim readily admits that if you’d told her when she started dental school that her future was in periodontics she wouldn’t have thought it likely. There was no grand plan or “lightbulb moment” to pursue the specialty. Instead, it began to intrigue her during clinical courses in southern California.

“Periodontics is a field that’s in the business of saving teeth, and if I can give some of that hope to my patients, I want to learn how,” Kim said.

Kim’s dentistry studies actually began when she was a student at Oregon State University, where she earned bachelor’s degrees in Spanish, international studies, and general science with a pre-dental focus. During her time at OSU, Kim traveled overseas to Ecuador, where in addition to fulfilling her Spanish requirements, she mentored “street kids” and spent time living with an indigenous community in rural Ecuador as part of her international studies degree, writing a thesis on the bio-cultural perspectives on nutrition and pregnancy and its impact on dental care in rural Ecuador.

She also volunteered her time on the Tooth Taxi, the mobile dental office that has served thousands of children across the state with millions of dollars of donated dental care, where she would later work as the full-time dental assistant.

Kim was drawn to serve on the Tooth Taxi to help provide much-needed care to uninsured and underserved kids. The Tooth Taxi, created through a partnership with OEA Choice Trust, Moda Health and the Dental Foundation of Oregon, the charitable arm of the Oregon Dental Association, is funded by foundations, corporations and individuals.

“I loved working with the children and being able to give back to the community, which is so important to me. My tenure on the Tooth Taxi was a really good experience and a time of big growth for me, the interactions I had with students, educators and volunteer dentists, and witnessing the eye-opening needs in Oregon for dental care and oral health education,” Kim said.

“It prepared me well for dental school because I was exposed to dentistry every day and I had the opportunity to work with general and specialty dentists across the state.”

Mary Daly, the Tooth Taxi’s former program manager, described Kim’s contributions as “instrumental.” Kim served as dental assistant as well as administrative lead, drove the van and set up for clinics, translated for Spanish-speaking patients, and delivered oral hygiene presentations to classrooms in English and Spanish.
“Her boundless energy and passion set the stage for a positive experience for the students. She made up jokes in Spanish that related to food and fillings and would entertain the patients.”

– Mary Daly, the Tooth Taxi’s former program manager

“She loved her job on the Tooth Taxi and did a great job with the kids, or ‘kiddos,’ as she affectionately called them,” Daly noted. “Her boundless energy and passion set the stage for a positive experience for the students. She made up jokes in Spanish that related to food and fillings and would entertain the patients.”

Daly also stressed Kim’s advocacy for “reaching out to teen parents at schools the Tooth Taxi visited, educating young moms without judgement about taking care of their babies’ teeth and their own.”

Kim, Daly noted, was deeply committed to pursuing dentistry, taking advantage of “every opportunity to get exposure and experience” from mission trips to Mission of Mercy clinics.

“The local dental community is fortunate to have her in their community,” Daly added. “We know Sei will be a familiar contributor to the overall mission of providing good oral health care to the underserved.”

In 2012, after two years with the Tooth Taxi, Kim enrolled in dental school with an eye toward practicing general dentistry after graduation. Through the influence of her experience on the Tooth Taxi, Kim was involved in a research project at Western U, presenting on the sustainability of School-Based Oral Health Centers, and served as the coordinator of a special needs clinic and of dental outreach trips to Mexico. Her unexpected pivot to periodontics is part of Kim’s approach to life, which values being open to new possibilities.

“Things happen the way they should,” Kim said. “I have to stay open minded or else I’ll miss out on opportunities that could potentially present themselves to me. I’m taking it step by step, seeing what opportunities come my way, learning and hopefully working in the Portland area, where my family is.”

“Smiles are What we Live For.

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Oregon Dental Executives’ Association Celebrates 20 Years of Making Dental Teams Stronger

By Melody Finnemore

WHEN THE OREGON DENTAL EXECUTIVES’ ASSOCIATION WAS ESTABLISHED 20 YEARS AGO, no association existed to provide professional training and networking resources for administrative personnel working in the dental field.

Four office managers—Charlene Murray-Quandt, Judy Brink, Cathy Sams, and Sarah Seal-Harwood—co-founded the ODEA with the mission of helping dental office managers, receptionists, scheduling coordinators, financial coordinators and other administrative personnel develop management skills that ensure quality patient care, employer profitability and personal growth. ODEA was the first statewide association in the nation designed to represent dental administrative personnel, according to the association’s website.

The association’s mission remains the same, but much within the profession has changed over the last two decades. ODEA President Jan Douglas, manager of TenderCare Dental in Gladstone, said stringent HIPAA regulations, an increase in insurance plans and advancing technology are just a few of the major changes that have occurred.

“I think the need for the organization is much stronger than it used to be because of all the changes in the dental profession,” said Douglas, who has worked in the dental field for more than 30 years and has been an ODEA member since 2003. “So many things are changing so rapidly.”

Douglas noted that most dental administrative professionals wear many hats and have had to learn their various roles, as well as the business side and the practice side of their dental office, on the fly, so to speak. The ODEA offers several resources, including continuing education classes, study clubs, networking events, a seminar each fall, newsletters and resource articles to help keep members up to date on the latest HIPAA issues, technology advances, changing insurance industry standards, leadership skills and how to promote improved communication among the dental team.

In addition, the ODEA hosts a table at the Oregon Dental Conference each spring and partners with the Oregon Dental Association to provide speakers and classes for the Portland conference. Douglas said the ODA is the first statewide dental association that invited another organization to bring speakers in to its annual conference.

“We appreciate that, and representatives from the Idaho Dental Association stopped by our table this year and said they need us in Idaho,” she said. In addition, Chris Verbiest, vice president of the Dentists Benefits Insurance Company, recommended that all dentists attending the conference stop by ODEA’s table because the association offers a breadth of education that helps reduce dentists’ liability.

Another aspect of ODEA’s work involves partnering with dental insurance carriers to present opportunities to bring the dental office and the carriers together on the same page.

Douglas said administrative professionals are now a much more integrated part of the dental team than in the past. While there used to be a distinct divide between the front office and the back office in most dental practices, that atmosphere isn’t as common today. It also helps that there is a natural progression from working as a dental assistant to working in the front office, and it’s invaluable when an administrative professional has that practice experience as well, she said.

“There has been a lot of training, seminars and classes in working together as a team,” Douglas said, noting the many benefits of fostering a more integrated dental team.

“Any time things are running smoother, it improves everyone’s experience,” she said. “For me, to work in an office where everyone works together, it’s more efficient, everyone gets along and there is more harmony, and patients pick up on that atmosphere.”
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The Tooth Taxi

THE TOOTH TAXI TEAM IS WELL INTO THEIR SUMMER SCHEDULE with visits to Gervais, Hillsboro and Molalla. We are excited to have the opportunity to follow up with many of the kids we saw last summer and are happy to report that the percentage who need work is down significantly for this group. With the help of our site coordinators we have also been able to reach many new children who have not had access to regular dental care in several years and have substantial work to do.

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continues on page 30
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PRACTICES FOR SALE

G/P PRACTICE FOR SALE IN COOS COUNTY. Annual collections over $765,000 on a three day work week. Three fully equipped operatories and plumbed for two more. Digital X-rays, Cerec CAD CAM. Well-trained staff will stay with the practice and help with the transition. Over $325,000 in Cash Flow. Hi Net/Lo Overhead practice. Selling Doctor refers out most endo and oral surgery. Located on one of the best locations on the Oregon Coast. Contact: Buck Reasor, DMD; Reasor Professional Dental Services, info@reasorprofessionaldental.com, 503-680-4366.

G/P PRACTICE FOR SALE IN SE PORTLAND. Well established practice for sale that has been in the same location for 38 years. Seller owns building and would either sell the building now or in the future. 1600 sq ft dental office with 3 operatories. Annual collections over $270,000. Seller refers out a lot of procedures and gives the buyer great potential for increased revenue. Great location with excellent visibility and hi traffic count. All staff will assist with the transition and stay with the practice. Excellent hygiene program that produces 1/3 of the production. Contact: Buck Reasor, DMD; Reasor Professional Dental Services, info@reasorprofessionaldental.com, 503-680-4366.

G/P PRACTICE FOR SALE IN GRESHAM, OR. Medical condition dictates sale of practice. Annual collections over $425,000. 4 fully equipped operatories with Digital X-rays. Fee for service practice with no PPO’s Outstanding collection policy. Well-established practice that has been in the same location for over 25 years. Outstanding experienced staff will stay with the practice and assist with the transition. Contact: Buck Reasor, DMD; Reasor Professional Dental Services, info@reasorprofessionaldental.com, 503-680-4366.

G/P PRACTICE FOR SALE IN CENTRAL OREGON. Outstanding practice for sale with large cash flow. Annual collections over $1.175M. 7 fully equipped operatories. CT Scan plus digital X-rays. Excellent hygiene program in place accounting for over 40% of production. Outstanding staff will assist with the transition and stay with the practice. Practice has been in the same location for over 33 years. Building located on the busiest street in town with great visibility and access and plenty of parking. Contact: Buck Reasor, DMD; Reasor Professional Dental Services, info@reasorprofessionaldental.com, 503-680-4366.

PERIODONTAL PRACTICE FOR SALE IN THE WILLAMETTE VALLEY. Collecting over $1,950,000 annually. Hygiene accounts for 50% of total production. Excellent cash flow. Office has 10 fully equipped operatories. Well-established practice has been in the same location for 19 years. Well-trained and tenured staff will assist with the transition and stay with the practice. Dr. owns the building and eventually would sell to the buying doctor. Contact: Buck Reasor, DMD; Reasor Professional Dental Services, info@reasorprofessionaldental.com, 503-680-4366.

PRACTICES FOR SALE ON THE NORTH-CENTRAL OREGON COAST. Three operatories with digital X-rays. Annual collections over $585,000. This well-established practice has been in the area for 34 years. Excellent collection policy in place. Well-trained staff will continue with the practice and assist with the transition. Great opportunity for a young dentist as the selling dentist refers out most endo and oral surgery. Excellent hygiene program in place that produces 40% of the production. Building is in an excellent location with great visibility and would be available to the buyer to purchase. Contact: Buck Reasor, DMD; Reasor Professional Dental Services, info@reasorprofessionaldental.com, 503-680-4366.

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