

ORACLE

NAPA-SOLANO DENTAL SOCIETY NEWSLETTER



May/June 2016

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NAPA-SOLANO



DENTAL SOCIETY

Community Connection: Blake Austin College

Dear Colleagues and Friends,

I attended an Occupational Advisory Board Meeting recently at Blake Austin College in Vacaville. Like many of your assistants, my assistant is a graduate of Blake Austin. I am also very familiar with their cosmetology program since I spent many hours with their hairstylists with my daughter!

A brief history of Blake Austin College: Joanie Reeds started Blake Austin in 1996. The campus moved to Orange Drive (by the DMV) in February 2005. The dental assisting program was established in 2008. Currently there are 25 active students in the program, and the school has had 170 graduates since 2009.

Initially we had a general briefing about the school and its

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Regulatory Roundup

Time to register for CURES

All prescribers in California with U.S. Drug Enforcement Administration (DEA) registrations are required to register by July 1 to access California's prescription drug monitoring program, known as CURES 2.0 (Controlled Substance Utilization Review and Evaluation System).

Additionally, prescribers must have updated browsers to access the system. Prescription drug monitoring programs are used in most states to aid prescribers and dispensers to identify fraudulent or drug-seeking activity by a patient. Dentists are strongly encouraged to consult CURES when considering a controlled substance prescription for a new patient or a patient suspected of drug dependency.

To access CURES 2.0, dentists are required to use Microsoft In-

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Community Connection continued from Page 1

various programs. Then we went to our classrooms to learn about the specific programs related to our fields. Our hostess, Tracy Stewart, RDA, had us seated around a table. Their dental assisting program class looked very organized, clean and student-oriented. There were four dental operatories in this section. There are also two additional chairs in the adjacent room.

We had the chance to ask questions, learn about the school and specifically the dental assisting program. We had an interactive learning session with a slide-show presentation. Tracy then asked us for our suggestions for the program. She took careful notes of the suggestions that were made by the attendees.

Then we took a tour of the operatories, the lab section and the sterilization area. The flow seemed very nice. The operatories were very modern. There was even a Cerec machine!

I believe it is important to recognize Blake Austin College and the part it plays in our community. The



Photo courtesy of Dr. I. Emrah Basaran

From left, Kathleen Caballero; Mercedes Pereda of Solano County; Tracy Stewart, RDA; and Dental Assisting Program Director Janet Cubol, DMD, at Blake Austin College.

college is an important part of a team that provides care to our community!

Sincerely,

I. Emrah Basaran, DDS

Regulatory Roundup continued from Page 1

Internet Explorer Version 11.0 or greater, Mozilla Firefox, Google Chrome or Safari.

Opioid use and deaths attributed to abuse are sharply on the rise. Prescribers in the U.S write nearly 100 percent of opioid prescriptions worldwide. In California alone, more than 1 billion dosage units of hydrocodone combination products were dispensed during the 2013-14 fiscal year.

To register, visit <http://oag.ca.gov/cures>.

HHS starts HIPAA audits

Dental practices should not ignore any email from the HHS Office for Civil Rights (OCR) as the agency announced that it has started the next phase of audits of HIPAA covered entities and business associates.

The emails have been sent to verify contact information. If an entity does not respond to OCR's request to verify its contact information or to complete a pre-audit questionnaire, the entity may still be selected for an audit or subject to a compliance review. Additionally, OCR expects entities to check junk or spam email folder for emails from OCR.

Many of the audits will be "desk audits" as op-

posed to on-site audits. OCR will review policies and procedures to determine whether they meet certain standards and specifications of the HIPAA Privacy, Security and Breach Notification Rules. The audit itself is intended to work as a compliance tool as well as to identify best practices for compliance.

OCR has an audit protocol on its website and anticipates posting later this year an updated version that will reflect requirements newly established in 2013 with the HIPAA Omnibus Rule. The audit protocol can be used by entities to conduct their own internal self-audits.

More information on the audit program is available on the HHS website, <http://hhs.gov/hipaa/for-professionals/compliance-enforcement/audit/index.html>. For additional information or questions, contact CDA Practice Support at <http://www.cda.org/practicesupport>.

FDA seeks powdered glove ban

The U.S. Food and Drug Administration is proposing to ban the use of most powdered gloves, including powdered surgeon's gloves, powdered patient

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CDA Cares Ventura delivers \$1.5 million in dental services

The CDA Foundation's volunteer dental clinic, CDA Cares, provided \$1.5 million in charitable dental services to 1,884 people during the April 16-17 event at the Ventura County Fairgrounds.

In addition to providing dental services at no charge to Californians who experience barriers to care, CDA Cares educates the public and policymakers about the importance of good oral health and the need for an adequately funded dental safety net, which includes a well-functioning Denti-Cal program.

"These events highlight the tremendous oral health need in California, and it's an incredible feeling to know that we are able to help more than 1,884 people in just two days," said CDA President Ken Wallis, DDS. "CDA is always looking for ways to improve access to care, and one of the things we're doing this year is sponsoring a ballot measure to raise the state's tobacco tax, which will support health care programs, save billions of dollars in smoking-related health care costs and save thousands of lives."

During the two-day event, dentists and dental professionals provided 11,583 dental procedures, including fillings, extractions, cleanings and oral health education. Volunteer technicians in the clinic's dental lab area worked to provide 188 complete and partial dentures and repairs.

"It's a great feeling to know you've helped someone by relieving their pain or infection. Patients hug us and leave smiling," said Jean Creasey, DDS, chair of the CDA Foundation.

Another CDA Cares event will be held in Stockton Oct. 15-16.

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Regulatory Roundup continued from Page 2

examination gloves and absorbable powder for lubricating a surgeon's glove.

Powder is added to gloves to help make them easier to put on and remove; but these type of gloves, according to the FDA "pose an unreasonable and substantial risk of illness or injury to health care providers, patients and other individuals who are exposed to them, which cannot be corrected through new or updated labeling."

The FDA says aerosolized glove powder on natural rubber latex gloves, but not on synthetic powdered gloves, can carry proteins that may cause respiratory allergic reactions. Although powdered synthetic gloves do not present the risk of allergic reactions, these devices are associated with an extensive list of potentially serious adverse events, including severe airway inflammation, wound inflammation, and post-surgical adhesions, which are bands of fibrous scar tissue that form between internal organs and tissues. These side effects have been attributed to the use of glove powder with all types of gloves, the FDA said in a statement.

Public comments are being accepted on the proposed rule online at <https://www.regulations.gov>.

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NAPA-SOLANO



DENTAL SOCIETY

ORACLE

Newsletter of the
Napa-Solano Dental Society

P.O. Box 210

Fairfield, CA 94533

Phone: 707.428.3894

Fax: 707.676.1412

E-Mail: exec@n-sds.org

www.napasolanodentalsociety.org

EDITORS

Thomas Campbell, DDS
707.745.1994

James Stich, DDS
707.427.8836

EXECUTIVE DIRECTOR

Gail Grimm, CAE
707.428.3894

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Make the most of a visit to your physical therapist

Physical therapists (PTs) are highly educated, licensed health care professionals who can teach patients to prevent injury, manage pain, and restore mobility. Oftentimes, through treatment techniques and exercise, one can avoid extensive surgeries or need for long-term pharmacological management.

Your Health

Your PT's goal is to help you return to your prior level of function and maintain your ability to perform activities of daily living. In California, and most other states in the U.S., one can make an appointment directly with a PT without a physician referral (however many insurances require a referral for coverage through your plan).

To make the most of your PT visit, you may want to prepare a few things prior to your appointment. For example:

- Make a note of any key information in your medical history.
- Write a list of symptoms (pain, numbness, tingling, etc.), any factors that aggravate or ease (ice, heat, compression, rest, etc.) your condition, and whether the symptoms more prominent during certain times of the day.
- Make a note of any incidents or injuries that you think might have contributed to your current condition(s).
- Write a list of your medications/vitamins/supplements.
- Consider taking a family member or trusted friend to help take notes from the visit or remember important details from your medical history.
- Ask if you should wear or bring a certain type of clothing to ease evaluation and treatment.

During your visit, you can expect your PT to ask you many questions about your health including the condition that brings you into the clinic. This additional information will help your PT to determine if you will benefit from physical therapy or whether you need to be referred to a medical doctor or another specialist. Your PT will evaluate your



balance, strength, and static/dynamic postures with certain activities (bending/lifting/reaching), flexibility, coordination, and vital signs. In addition, your PT may palpate the affected region to perform a more detailed examination of the joints and muscles.

You and your PT will work together to determine your goals and develop a treatment plan to achieve those goals, as well as improve your mobility and ability to perform activities of daily living. In most cases, your PT can begin to address your pain, limited motion, or weakness immediately in the first session. An important aspect of your physical therapy treatment will be patient education. Your therapist will likely teach you an exercise program to strengthen and stretch your muscles and advise you in using different techniques to perform at home and work to minimize pain, decrease strain, protect against re-injury, and reduce recovery time.

Your PT may recommend for you to return for follow-up visits at a frequency determined based on your condition and scheduling needs. During each visit, your PT will continually assess your response to treatment, make any adjustments as needed, and work towards discharge from physical therapy when you are ready. Your physical therapist may have some after-care instructions, for example to continue your home exercise program and activity modification to minimize re-injury in the future.

Yoga can keep your practice on track

By Allan R. Nett

The posture required for dental professionals to perform dentistry can lead to spinal discomfort and even injury. A dental professional's spine is consistently, constantly and unilaterally flexed, rotated and expected to hold an unbalanced position for extended periods.

Your Health

tently, constantly and unilaterally flexed, rotated and expected to

The posture may even generate a "functional scoliosis," or temporary curvature of the spine, that for some practitioners can lead to an early retirement and a lifetime of physical misery. Studies have shown that: back, neck, shoulder, and/or arm pain is present in approximately 81 percent of dental professionals. (J.G. Phebus, *Compendium*, May 2015)

Practice of yoga poses can help balance the spine, relieve pain and potentially extend your career by preventing future injury.

Iyengar yoga can address these difficulties and start to correct misalignments. Every movement, or pose, is therapeutic if done with the correct alignment.

Yoga builds an "inner awareness" of alignment and health. This awareness is developed by paying attention to how the body feels in any position at any time. Although this sounds easy, it is challenging to build this awareness. Once you can really "feel" your body, you can start to alleviate discomfort with minute actions and movements that can correct imbalance.

By practicing a few postures regularly, you can start to unwind the Gordian knot your spine may be starting to resemble.

Classical yoga practice general done barefoot, using a sticky mat and wearing clothing designed for flexibility. Office yoga, on the other hand, is designed to be practiced in work attire and with regular shoes on, in half-hour segments in a formal class or individually as needed for 1-minute sessions.

Yoga's benefits are legion: health for the body and calming for the brain and nervous system. It can be practiced almost anywhere, at any time, for no cost; and even 1-minute practice sessions are beneficial.

Deciding that you want to make a change and

Yoga for Restorative Health

6 p.m., May 26

Chardonay Golf Club

For more information or to register, contact

Gail Grimm at 707.428.3894 or exec@n-sds.org.

making a commitment to your physical, mental and emotional health are your first steps.

Yoga is a state of awareness. It involves much more of a mental/physical awareness than any other type of workout. As you start to focus your attention on your body, you will recognize when a posture is unhealthy and take a break to counter-stretch and release the constant muscle contraction.

Recognizing imbalance is one of the first steps to developing a strategy to regain health. Practicing with the idea of unwinding any existing injury will allow you to perform your job at a higher level of proficiency, most likely improve your productivity and not cause as much pain.

Developing a 5-minute routine and then performing it several times a day can change your life.

I suggest you become proficient at office yoga. The goal is practicing gentle, easy positions that the mind directs and guides to an optimal pose so that you receive the benefit and produce a sense of ease for the body and mind.

Yoga is one of the few disciplines that expands your consciousness and allows your involvement to be at your own speed. Establishing balance in your body and mind has multiple benefits for both your practice and personal life.

You are invited to join my 2-hour yoga demonstration workshop with Napa-Solano Dental Society.

We will discuss how the spine works, how imbalances develop, and how to improve and move toward balance. We will perform short, directed movements with a goal of achieving awareness of physical issues.

Allan Nett is a certified Iyengar yoga instructor. Learn more at <http://www.ywybo.com>.

Physical thefts can compromise patient privacy

More than half of the data breaches in health care settings are a result of devices being physically stolen from a practice, car, home or elsewhere. Data breaches can result in big costs for dentists who fall victim to such a breach should unencrypted patient health information be stolen.

"In the health care sector, we are seeing more breaches of stolen data. That trend has been consistent over the last four years," said Joanne McNabb, CIPP/G, CIPP/US, CIPT, director of privacy education and policy in the Privacy Enforcement and Protection Unit at the California Department of Justice. "Medical and dental offices are lagging behind other industries when it comes to the strategic use of encryption."

According to the attorney general's 2016 California Data Breach Report, the health care industry continues to be vulnerable to physical breaches, "although malware and hacking breaches are starting to increase as the sector's transition to electronic medical records progresses," the report said. Patient records and Social Security numbers are a top target for thieves. The report goes on to state that in 2012, 68 percent of health care breaches were the result of stolen or lost equipment, compared with 21 percent of breaches in all other sectors. In 2015, 39 percent of health care breaches were of this type, while in other sectors it accounted for just 13 percent.

While there has been some improvement with stronger encryption practices to protect medical information in recent years, the report states, "There is still a long way to go in addressing this preventable type of breach."

Dental practices have slightly larger breaches than medical practices, with an average of 4,741 individuals affected by a breach in a dental practice. Estimates on the cost of a data breach from the Ponemon Institute and others would put the cost of an average dental practice breach at between \$100,000 and more than \$1 million, McNabb said.

CDA offers members the following recommendations to protect their data.

Encrypt data at rest.

Encryption is an "addressable" technical standard under the HIPAA Security Rule, which means it is not required. However, data encryption provides a safe harbor from the notification provisions of state and federal data protection laws. If a dentist's system is capable of encryption, he or she should do it. Dentists can double check with their practice management software vendors about the ability to encrypt data.

Strengthen the physical security of the server and hard drives if encrypting the data is not an option.

Check for ways to secure the drives to something difficult to move. Or, add additional barriers to impede access to the system as well as access to the office and/or patient files or computers.

Encrypt portable devices, such as laptop computers and flash drives.

A dermatology practice lost an unencrypted thumb drive and recently reached a resolution agreement with Health and Human Services that called for the practice to pay \$150,000 and comply with a corrective action plan. If dentists cannot encrypt these devices, they should consider using cloud backup services. If using a cloud backup service, have a business associate agreement with the company.

Purchase a data compromise policy.

TDIC offers this policy, with \$50,000, \$100,000 and \$250,000 limits, as an addendum to property coverage. Such a policy can pay for mailing notification letters to patients, providing affected individuals with credit monitoring and more.

For more information on TDIC's offerings, visit tdicinsurance.com. View the CDA Practice Support resource *HIPAA Security Rule — A Summary of Data Breach Notification Requirements* at <http://www.cda.org/privacy-HIPAA>.

For more information from the California attorney general's office, visit <http://www.privacy.ca.gov>.

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CDC publishes new infection control resource

Minimizing exposures to infectious agents should be a primary objective in a dental office for the sake of the staff and patients. To help provide guidance on this, the Centers for Disease Control and Prevention has released a resource to further prevent infections in dental practices.

The resource, titled "Summary of Infection Prevention Practices in Dental Settings: Basic Expectations for Safe Care," summarizes current infection prevention recommendations and includes a checklist that can be used to evaluate compliance. The information presented is based primarily upon the previously published 2003 guideline and represents infection prevention expectations for safe care in dental settings.

The resource includes additional topics and information relevant to dental infection prevention and control published by CDC since 2003, including:

- Infection prevention program administrative measures.
- Infection prevention education and training.
- Respiratory hygiene and cough etiquette.
- Updated safe injection practices.
- Administrative measures for instrument processing.

The CDC states that transmission of infectious

agents among patients and dental health care personnel in dental settings is "rare." With that being said, the CDC states that from 2003 to 2015, transmissions in dental settings, including patient-to-patient transmissions, have been documented. According to the CDC, there is a need for comprehensive training to improve understanding of underlying principles, recommended practices, their implementation, and the conditions that have to be met for disease transmission. All dental settings, regardless of the level of care provided, "must make infection prevention a priority and should be equipped to observe Standard Precautions and other infection prevention recommendations."

For more guidance on infection control, visit <http://www.cda.org/practicesupport> and click on the orange "Regulatory Compliance" tab on the right side of the page. A link to the CDC's "Summary of Infection Prevention Practices in Dental Settings: Basic Expectations for Safe Care" resource has been added to the External Links page (under the National Agencies tab) on <http://www.cda.org/practicesupport> as well.

For additional information, visit <http://www.cdc.gov>.

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NAPA COUNTY: General adult practice with an emphasis on complex restorative, cosmetic and implant treatment. This office is state-of-the-art and an ideal opportunity for a well-trained general dentist or prosthodontist who is skilled in the use of CEREC and 3-D conebeam technology. The office is currently operating an average of three days per week, and there is tremendous upside potential as many endodontic, implant placement and oral surgery cases are referred to local specialists. Annual revenues average \$600,000 with a net income of \$275,000. Interested prospects should send a cover letter and current CV by email to molinelli@aol.com or call **650-347-5346**.

You should consider taking action on Medicare

CDA Practice Support continues to receive many questions about the approaching deadline for providers to opt in or out of the Medicare system. The Q-and-A below provides some basic facts about Medicare, dentistry and participating as a Medicare provider.

Q: Does Medicare cover dental procedures?

A: No ... and yes. Medicare does not cover dental procedures (anything designated with a CDT code), but Medicare will pay for procedures performed by a dentist that have a medical code assigned to it but is a very limited scope.

Q: Who should consider enrolling as a provider in Medicare?

A: As follow-up to the answer above, those dentists who provide services on a regular basis that can be claimed to medical plans might consider enrolling as a Medicare provider. This would likely be oral surgeons, dentists who perform a significant number of periodontal surgery procedures, such as bone and tissue grafts, or dental pathologists who perform analyses of biopsies. In short, specialists who perform procedures for which there are medical codes should consider enrolling as Medicare providers. Those wishing to enroll must submit a completed CMS Form 855i to the state's Medicare administrator.

Q: What is the "ordering/referring" provider status?

A: An ordering/referring provider is another provider category of Medicare, but such providers are not able to submit claims to Medicare for reimbursement because they are technically not "participating" providers in Medicare. The Centers for Medicare and Medicaid Services (CMS), the federal agency that administers Medicare, wrote a regulation that defines this category to be:

(1) A provider who "orders" non-physician items or services for the beneficiary, such as durable medical equipment, prosthetics, orthotics and supplies (DMEPOS), clinical laboratory services, or imaging services; and (2) a provider who "certifies" home health services for a beneficiary.

In terms of functionality, most dentists don't function in capacities that might be covered by Medicare.

How the ordering/referring category would apply to dentists should be thought of this way: Function-

ally, it is not different from the opt-out category (see below for discussion of opt-out category) in that an ordering/referring provider cannot send claims to Medicare. However, it is different in that CMS made a decision a year ago that providers who opted out cannot submit claims to Medicare Advantage plans administered by third-party payers. Medicare Advantage plans are privately administered Medicare plans offered primarily by commercial medical plans such as Anthem, Aetna and Humana, through which these administrators add on dental coverage. The dental coverage portion of a Medicare Advantage plan is not paid by Medicare, but is identical to dental coverage offered by a commercial insurer. However, CMS's decision that an opted-out dentist cannot submit claims for dental care to a Medicare Advantage plan creates a prohibition for the dentist who has opted out. An ordering/referring provider may submit claims to Medicare Advantage plans, so the dentist who sees a significant number of senior patients covered by Medicare Advantage should consider the ordering/referring provider category. That is the only real advantage to a dentist in enrolling as an ordering/referring provider, which can be done by submitting the CMS Form 855o to the state's Medicare administrator.

Q: I fabricate sleep apnea devices. How should I enroll with Medicare if I want to submit claims for these devices?

A: This is an entirely different provider category: Medicare Enrollment Application — Durable Medical Equipment, Prosthetics, Orthotics and Supplies (DMEPOS) Suppliers. That would require submission of CMS Form 855s. Be aware that Medicare will only pay for a specific type of sleep apnea device based on CPAP technology.

Q: What is the participation in Medicare Part D that I am hearing about?

A: Medicare Part D is the medication/prescription benefit within Medicare. Commercial pharmacies and pharmacy chains are sending out notices to dentists urging them to enroll in an appropriate provider category to enable their patients to take advantage of their Part D medication coverage. What the pharmacies are really saying is that if a dentist enrolls in one

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NSDS Continuing Education 2016

For registration and more information, contact Gail Grimm, CAE, Executive Director, 707.428.3894 or exec@n-sds.org.

DATE	TOPIC	INSTRUCTOR	LOCATION	TIME
May 26	Yoga for Restorative Health	Allan Nett	Chardonay	6 p.m.
Sept. 22	Business Law for Dentists	Ron Goldman	Chardonay	6 p.m.
Oct. 14	"Not a Full Mouth Rehabilitation Course"	Dr. Jose Luis Ruiz	Ramekins	9 a.m.
Dec. 2	Infection Control & Dental Practice Act	Tom Terry	Chardonay	3 p.m.

Medicare continued from Page 8

of the Medicare categories, they, the pharmacies, will be able to be reimbursed for filling prescriptions for Medicare patients so the Medicare recipient will not have to pay out of pocket. CMS rules allow prescriptions to be paid for only if either an enrolled Medicare provider, an ordering/referring provider or an opted-out provider orders them.

The Medicare opt-out category tells Medicare that a provider intends not to participate in Medicare, meaning claims will not be submitted to Medicare for reimbursement. By act of Congress, a provider, such as a dentist who specifically opts out of Medicare, may order a prescription for a Medicare-covered patient and Medicare will pay for that prescription. Therefore, the advantage of formally opting out of Medicare is that it extends the drug benefit of Medicare to senior patients. A dentist can opt out of

Medicare by submitting to the state Medicare administrator the opt-out affidavit and a sample private contract for use with Medicare patients. Both the affidavit and the sample contract can be found on the website for California's Medicare administrator, Noridian Healthcare Solutions: <http://med.noridianmedicare.com/web/jeb/enrollment/opt-out>.

Q: If I opt out of Medicare, may I still refer Medicare beneficiaries to specialists, whether physicians or oral surgeons, and have those services paid by Medicare?

A: Yes. Medicare will pay for medical procedures performed by providers enrolled in Medicare, whether physicians, oral surgeons, labs or radiological services.

Q: Where can I obtain the enrollment forms for Medicare?

A: The forms are readily available online by simply searching "CMS Form 855i," "CMS Form 855o" or "CMS Form 855s."

Q: What if I choose to do nothing — neither enroll in Medicare nor opt out?

A: As a provider, there is no penalty against you if you choose to do nothing in regard to Medicare enrollment options. However, there will be consequences for your senior patients who utilize Medicare Part D to cover prescription drugs. Failure to opt out will mean that any prescriptions ordered by you for the patient will have to be paid directly by the patient, out of pocket.

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New Members

The Napa-Solano Dental Society welcomes the following new members:

Vagan Tapshtsyan, DDS
General Practice
Vacaville

Jonathan Savage, DDS
General Practice
Napa

Joyce Pangilinan, DDS
General Practice
Fairfield



You are not a statistic.



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