Deadline to cash Delta Dental settlement checks approaches

Delta Premier Providers who are class members of the Delta Dental class-action lawsuit have until June 14, 2019, to cash their settlement checks. The $65 million settlement is the result of legal action CDA filed against Delta on behalf of members.

Most settlement checks sent to approximately 14,000 class members have been cashed, but the class-action settlement administrator reports that more than 500 settlement checks have yet to be cashed. The court ordered that all outstanding checks must be cashed by Friday, June 14, 2019. The settlement administrator will mail postcards to class members five months after the catastrophic Camp and Woolsey wildfires tore through more than 250,000 acres in Northern and Southern California, life and work are far from routine for dentists who lost their practices or homes — or both — in the fires. But many are beginning to find some semblance of daily structure and make long-term plans with the help of their colleagues and the dental community.

Funds made available through the CDA Foundation’s Disaster Relief Grant have also assisted dentists and their dependents and staff. The first grants reached qualifying applicants affected by the fires in...
Ask before you act: Save yourself time, headache and maybe even cost

There is an old saying: “An ounce of prevention is worth a pound of cure.” I believe this statement can be applied to any area, including business decisions.

As the dental benefits analyst for CDA Practice Support, one of my responsibilities is to write this monthly column about the dental benefit marketplace. Many of my topic ideas stem from call trends or patterns. When I see an uptick in calls related to a specific dental benefit topic, I’ll write an article to share important information with member dentists who may not be utilizing their member benefit and calling in for practice support.

The following are the top 10 “post-op” calls, so to speak, that CDA Practice Support has received from dentists who “made a decision,” whether through action or inaction, that resulted in an unexpected outcome and ended with a member saying, “I wish I would have called Practice Support before I...” I’ve included titles of past Update articles that specifically address questions raised in these calls so members can find even more details, if needed. Find them at cda.org/update.

1. I purchased a practice and assumed that the contracts and compensation the selling dentist had with the dental benefit plans would transfer to me as the new owner.

When purchasing a practice, the seller’s agreement and fees may not transfer to the new owner. The purchasing dentist should contact the plans to get a copy of the fee schedule and agreement they will sign if they buy the practice before they make an offer. Learn more in the April 2018 Update article “Dental benefit contracting: It’s not all about the fees — What you need to know before you sign.”

2. During the sale of my practice, I was told it was OK to allow the purchasing dentist to use my Tax Identification Number to bill the dental benefit plans while they were in the process of contracting with the plans. I’m finding out there is more to this billing practice than I first assumed.

Read about the risks involved in the above-described billing practice in the January 2019 Update article “Improper billing during practice transitions is risky business.”

3. I signed a dental plan contract and all of a sudden they changed the contract language and/or the contracted fee. This can’t be legal, right?

Plans legally can and do make changes to their contract, and sometimes these changes affect the contracted fees. That is why it’s important to read all correspondence from dental plans. Learn more in the February 2018 Update article “Dental plan correspondence — it’s not all junk mail.”

4. I received a re-credentialing notice from a plan. I missed the deadline to comply by only one day. I assumed it would not be an issue, but the plan notified me that it has terminated my contract. They are also saying if I want to contract with them again I have to sign a new contract and accept lower fees. Can they do this?

Learn more on re-credentialing and the consequences of not complying in a timely manner in the February 2018 Update article “Dental plan correspondence — it’s not all junk mail.”
AB 954, authored by Assemblymember Jim Wood, DDS, and sponsored by CDA, unanimously passed the Assembly Health Committee April 3 with favorable amendments to further protect dentists and patients when dental provider agreements are leased by third parties.

As CDA reported in the April Update, the bill was introduced to make the network leasing process more transparent. Currently, dentists are not always aware that their existing contract with a health care benefit plan is going to be transferred or sold as part of a leased network. Even those dentists who are aware of this arrangement may not know which entities their contract has been sold to or have access to the contractual terms of the entity they are being leased to.

Dentists should be able to easily locate the terms of a new contract, including fee schedules and limitations on services, to communicate these terms to patients. When both the dentist and the patient don’t have accurate information, the treatment planning decisions they make together are negatively affected.

AB 954 already contained a requirement that as of January 2020 any new health care plan contracts must clearly name the third parties that will have access to a provider network contract and give dentists the ability to opt out. The amended bill adds a requirement that when an existing dentist’s contract is leased to a “new” plan, the plan must notify the dentist and allow them to opt out of being leased.

A second amendment adds specific standardized language to be conspicuously placed in the notification requirement so that a dentist or their office staff can recognize this information. CDA and the bill’s author pushed for this amendment because such notices are frequently buried in plan contracts or letters.

Lastly, Assemblymember Wood secured an amendment requiring that a plan must provide to a dentist a list of plans to which that dentist’s contract will be leased before he or she signs the new contract. Under current law, plans must provide such a list only 30 days after the dentist has requested it in writing.

Third-party access to a provider network contract would only be lawfully granted under AB 954 if specific criteria are met.

Third-party access to a provider network contract would only be lawfully granted under AB 954 if all of these criteria are met.

“We continue to work with the California Association of Dental Plans to achieve a final bill that fixes numerous problems with network leasing,” Wood said. “AB 954 with the new amendments helps to further ensure that patients don’t suffer adverse financial impact and that dentists aren’t blindsided by unexpectedly low in-network rates.”

CDA will keep members informed about the bill’s progress through the Legislature. Read more background about the bill in the April Update or on cda.org.
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Dental supply class-action settlement notices mailed

Dentists eligible for payments as part of an $80 million class-action settlement involving dental supply companies Henry Schein Inc., Patterson Companies Inc. and Benco Dental Supply Company have received notices informing them that they have until Oct. 15 to file a claim in order to receive a payment, pending final settlement approval.

The settlement is part of a class-action lawsuit brought against the dental supply companies alleging that they agreed not to compete on pricing of dental products. The companies denied the claims. The class settlement is for customers who purchased dental supplies from Henry Schein, Patterson, Benco or Burkhart Dental Supply between Aug. 31, 2008, and March 31, 2016. Burkhart was at one time named as a defendant, but the case against it was dismissed; however, customers who purchased from the dental supply company during the class period may still participate in the settlement.

A final settlement approval hearing is scheduled for June 14. In order to receive a claim form from the class-action settlement, dentists must first register by completing the postcard mailed to them or submitting a claim form request online. Visit dentalsuppliesantitrustclassaction.com for more information.

In a separate action, a Federal Trade Commission complaint is still pending against Benco, Henry Schein and Patterson, which alleges the companies violated federal antitrust laws by conspiring to refuse to provide discounts to buying groups representing solo and small-group dental practices.

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CDA has leveraged the strength of our large membership to deliver even more value, including resources to support you in the business side of practice. **Endorsed Programs** provide money-saving solutions from vendors that have been vetted by CDA.

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****All programs are subject to credit approval and loan amounts are subject to credit worthiness. Some restrictions may apply. **To be eligible for this reduction, applicants must provide association name and membership number at time of approval.

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Make sure you’re using safe water.
early December 2018, and the last of the grants were disbursed in April, bringing the number of individuals who received emergency funds to 64 and the total dollar amount awarded to $395,000.

Seventeen dentists and 47 dental office staff are among the grant recipients, and the majority of them were living or working in or near Paradise, Calif., when the Camp Fire destroyed most of the town.

One of them is Chico-native Jeremy Chatfield, DDS, whose day on Nov. 8, 2018, began almost like any other. He and his wife noted the “dark red glow” in the eastern sky in the early morning, but because fires were not a wholly unfamiliar sight in those Sierra Nevada foothills, Dr. Chatfield made the roughly five-minute drive to his practice to see his first patient.

Forty-five minutes later, however, that distant red glow turned to an all-pervasive black and the warning texts and calls started coming in. Chatfield, his staff and his patient were soon out the door, heading to their homes to begin evacuating along with thousands of other residents.

“Both dentists’ practices were destroyed by the fire, as was the house Chatfield shared with his wife and three young daughters. Two dental hygienists and one dental assistant in Chatfield’s practice also lost their homes to the fire, while a third hygienist still remains evacuated from her partially standing home.

“It was a pretty devastating time for all of us,” Chatfield said.

Wilson’s home is on the southern edge of town and was spared by the fire, but nearly all of his staff were less fortunate.

Meanwhile, about two miles north of Chatfield Dental Inc., another grant recipient, W. Ron Wilson, DDS, had just finished a bridge impression at his practice on Skyway Drive when his wife called to tell him that a fire was in the area. She wanted him to come home.

“There’s always a fire out there,” Dr. Wilson recalled saying before continuing with his busy morning. But his wife called back with a more urgent plea just as others began to sound the alarm, so he alerted his staff and patients and closed the office.

“As I was trying to drive through town to get home, it came to me — we are going to lose this town. It was dark as night outside.”

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“My staff scattered. They’ve been living in multiple unfortunate situations that are gradually improving,” he said. One of his hygienists is now living on Wilson’s property. “It’s been very helpful to have the extra cash from the grant to supply my needs and to help with my staff’s needs too.”

Wilson is now practicing in a retired endodontist’s office with equipment that was loaned to him. He’s reduced his hours because his commute time has more than tripled, but he says he’s surprised at how busy he is. Some of his staff have joined him, one of whom also works reduced hours due to an even longer commute.

“Basically, I am surviving due to the generosity of friends,” Wilson said. “And TDIC is taking care of me — they paid out the limits on my equipment loss promptly.” For now, he says he has an adequate amount of patients but is looking to buy or lease a building, “probably in Chico, possibly in Paradise,” with space for a five-operatory office.

Chatfield used funds from the Foundation grant to secure a temporary rental accommodation in the Truckee area for himself and his family.

“It allowed us, especially my daughters, to get away from the smoke, away from the chaos,” he said. “There was a lot of trauma — emotional trauma and psychological trauma. It made a huge difference to not have to wake up every morning just to see and breathe in that smoke.”

The arrangement also made it easier for him to travel once or twice a week to work out of a dental practice in Chico owned by Brian Lange, DDS.

Dr. Lange had received regular updates about the fire from one of his own staff whose Paradise home was destroyed in the Camp Fire. Because he knew Chatfield and his brothers years ago when they lived in Chico, he reached out directly to offer the use of an operatory and all of his equipment.

“We just wanted to offer this opportunity so they could keep their patients as they tried to work through everything that was going on,” Lange said. “It was such an unprecedented situation to try to adapt to.” He credits his staff. “They’re the ones who did the hard work to make it all happen,” he said. “I was just able and happy to offer the space.”

Chatfield said he had “multiple calls” from dentists in Oroville and Chico, which was largely the work of Vi Gilbert, executive director of the Northern California Dental Society. Gilbert said the “outpouring of support from fellow dentists” allowed her to coordinate available operatory schedules for Paradise dentists.

“I’m grateful for how generous Dr. Lange and all of these dentists were for taking in Paradise dental offices, letting their patients come in and being willing to take emergency patients for us when we’re off work trying to figure out how to keep my patients in the immediate area,” Chatfield said.

Chatfield’s staff who lost homes applied separately for the Foundation grant. One put the funds toward a travel trailer that she and her husband eventually moved to their old Paradise lot. Another who had to abandon her car during the evacuation was able to put the funds toward the purchase of a car for transportation around Chico, to get to work and to take her children to school.

The grant was open to eligible dentists, dental assistants, dental hygienists, dental-office staff, lab technicians employed in the dental field and CDA component dental society staff. The Foundation considered applications for any eligible individual whose home or dental practice was destroyed or severely damaged as well as for displaced individuals and those who lost dental-related equipment.

“Many who suffered significant losses in these disasters received considerable help made possible by individual contributions to the grant from dentists as well as by CDA, TDIC and associations, including the New York State Dental Association and the Filipino Dental Practitioners of California,” said Ron Mead, DDS, CDA Foundation chair.

In the days following the disaster, including two weeks spent at a hotel, he did not miss a day of work, saying it was a good escape from everything else that was going on.

“I was just washing my scrubs in the bathtub at the hotel and hanging them out to dry. We were in survival mode, getting things for the kids and other needs taken care of. Dentists and friends dropped off blankets, gift cards for meals — I was really touched by all the help,” Pokras said.

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David Pokras, DDS

He credits his office manager, Marie DeWeese, for finding out about the Foundation grant and obtaining the application. “It was so unexpected and I didn’t anticipate it. Being underinsured on my home, every little bit helped.”

“The grant made a huge impact in a lot of people’s lives,” said Chatfield, who will soon relocate with his wife and children to Idaho. The TDIC policyholder also received a payout, to his policy limits, for the loss of his practice and equipment. He’s now shopping for a new practice — ideally an existing one, rather than building one from scratch.

“These are just examples from my office, but I know there were many more people who went through the same thing and received the grant and additional support from dentists who gave what they had to bless others,” Chatfield said.

According to Dr. Mead, the Foundation strives to help members and other dental professionals as individuals. “We have several programs to help specific groups such as new dentists, but this grant was a program for everyone,” he said.

*Donate to the CDA Foundation Disaster Relief Grant or learn more about Foundation programs at cdafoundation.org*
Ask
From PAGE 2

5. I received a letter from a plan telling me they will be conducting an audit of my patient chart records. They want me to send them 25 charts for patients covered by them. Must I comply with this request?

Learn more about dental plans’ authority to audit in the May 2018 Update article “Understanding audit authority of third-party payers.”

6. I complied with a dental plan’s requests to send them 25 charts for patients covered under this plan. Now the plan is asking for a large amount of money back. I’m not in contract with this plan, so do they legally have the right to audit my charts?

Dentists should be aware that while a plan with which they do not have a contract cannot require participation in an audit, dentists who voluntarily submit to an audit are likely obligated to open their patients’ records to be reviewed by the plan. Learn more in the February 2017 Update article “Understanding dental plan audit authority.”

7. I called a dental plan for a breakdown of benefits and they misquoted the policy and its limitations, which resulted in a denied service and an unexpected bill for the patient. Both our patient and office have filed a complaint with the plan, but they are saying that information provided over the phone is not a guarantee.

To minimize misquotes and to obtain more detailed policy information, including limitations and exclusions, I recommend using a plan’s online portal. Many plans today have online portals that house patients’ eligibility, benefits, treatment history, frequencies, remaining maximums, deductibles, exclusions and limitations. Learn how to use these online portals in the January 2018 Update article “Hang up and log in — dental plan audit information is a click away.”

8. I spent months on the phone trying to get a claim reprocessed. Now the plan says I have surpassed the timely filing limit. Isn’t there a state law that says I have 12 months to submit a claim?

There is no law in California concerning timely filing. Dental benefit policies can and do have different filing time frames, including very short time frames, which is why it’s important to know what the policy states. Rather than waste your time calling the plan, try to get a claim reprocessed, initiate your right under state law and file a formal written provider dispute with the plan. Learn more about this important right in the July 2018 Update article “Provider dispute process offers fair, fast and cost-effective resolution.”

9. I am a contracted dentist with a plan and I assumed the contract would follow me to my new practice location. I called the plan to let them know about the new location, but they said that is not an option and instead are requiring me to sign a new contract for the new location, and the compensation is not the same as my current location. Is this legal?

Not all dental benefit plan contracts are portable; in fact, many are location-specific. When adding a location, find out if the dental benefit plan contracts are portable. Additionally, find out if the contract and compensation will differ at the new location before you make the decision to open a new location. For more information, read the April 2018 Update article “Dental benefit contracting: It’s not all about the fees — What you need to know before you sign.”

10. A dental benefit plan I’m in contract with performed a chart audit a few months ago. I received a report from them and they are asking for monies back. They say they are demanding a refund because I did not have in-depth documentation of the treatment provided in the patient’s chart record. Is this legal?

Dental benefit plan quality-assurance consultants are trained to look for patterns. One pattern they look for during a review is the lack of documentation. When no record can be found to prove that a claimed service was provided, plans often will say the service was not provided and demand the funds paid for the service to be returned. Learn more in the June 2018 Update article “When refund demands follow audits by third-party payers.”

If you have questions about dental benefits, contact the CDA Practice Support experts before you act. Call 800.232.7645 or submit your question online at cda.org/ask.
Comparing consistency in supply pricing: Three tdsc.com case studies

The Dentists Supply Company is now delivering supply savings to association members in 13 states. This rapid growth means even stronger collective buying power, but it’s also called attention to the nationwide need for consistent, competitive pricing. By shopping tdsc.com, dentists continue to see 20% average savings compared to the manufacturers’ suggested retail price*. However, the TDSC difference is often greater when compared to the actual amounts practices have been paying elsewhere. CDA members are seeing how tdsc.com prices can be lower and more stable than their invoiced prices from other suppliers.

Through its free price comparison service, the TDSC team analyzes shoppers’ current invoices from other major suppliers to find product-by-product savings potential. These comparisons, calculated on behalf of state dental association members from New York to California, are revealing four e-commerce irregularities.

For the exact same name-brand products, as invoiced by major suppliers:

1. Pricing differs significantly from supplier to supplier.
2. Pricing differs significantly from state to state.
3. Pricing differs from practice to practice shopping the same supplier in the same state.
4. Many dentists are charged more than the MSRP.

Case studies of three popular products show how these differences create cost inequities and how TDSC continues to demonstrate consistent savings.

Case study 1: Disinfecting wipes**
The MSRP for Metrex/Totalcare CaviWipes Disinfecting Towelettes (160/pkg) is $10.40*. The exact same product is $8.24 at tdsc.com every day, a 21% savings ($2.16).

Dentists in California and 11 more states shared invoices with TDSC showing the prices they paid for CaviWipes.

In the 27 invoices reviewed, the per-unit price charged was as high as $16.49. Of note, one supplier charged a practice in South Carolina nearly double what it charged another practice in California for the same CaviWipes.

Case study 2: Anesthetic cartridges**
The MSRP for Septodont Septocaine 4% with Epinephrine (50/pkg) is $67.50*.

In a sampling of 43 invoices, the per-unit price charged was as high as $60.99.

Of note, one supplier charged a practice in South Carolina nearly double what it charged another practice in California for the same Septocaine.

Case study 3: Dental floss**
The MSRP for Sunstar Americas GUM Eez-Thru Threaders (500/pkg) is $35*.

Program benefits for CDA members:
- 0.25% discount on your interest rate¹
- $500 cash bonus when you refinance²
- No origination, application, or prepayment fees

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¹ 0.25% discount will be reflected on the final truth-in-lending disclosure. Lending decisions are not impacted in any way by participation in this offer. Offer is non-transferable. No substitutions. Limit one offer per loan.
² $500 to be credited to your PayPal account within 6 weeks of loan funding. Lending decisions are not impacted in any way by participation in this offer. Offer is non-transferable. No substitutions. Limit one offer per loan.

Offered terms subject to change and state law restrictions. Loans are offered through CommonBond Lending, LLC (NMLS #1175900).
Dental product launches, convention specials in store for CDA Presents attendees

On exhibit May 16-18 at CDA Presents The Art and Science of Dentistry will be the latest in dental innovation from over 550 companies, and several dozen of them will launch brand-new products and services at the Anaheim meeting.

Attendees who explore the Anaheim Convention Center’s exhibit hall can expect to find every product category represented, from amalgamators to dental water tests and from composite warmers to handheld X-ray generators. Exhibitors specializing in financing, investment planning and other services that cater to dentists in every stage of practice will also be on-site, including representatives from CDA’s three newest Endorsed Programs: CommonBond, offering student loan refinancing; HR for Health; and WEO Media.

Because CDA is only hosting one C.E. convention in 2019, attendees may especially want to take advantage of exclusive specials that many exhibitors will provide for convention-goers who stop by their booths.

“Do yourself a favor and leave time in your schedule to walk the exhibit hall floor,” said Claire Tyler, DDS, CDA Presents Board of Managers chair. “Not only are there cool new products and cost-saving specials to be found but countless opportunities to connect with your peers and have some fun.” Attendees can participate in daily raffles and booth giveaways for chances to win prizes, for example.

“All the while, you’re helping to support our exhibitors who contribute largely to the success of these meetings,” Dr. Tyler said.

Highlighted here are just 10 of the numerous new products and services that CDA Presents attendees will find in May at the Anaheim Convention Center. Attendees can use the exhibit hall map within the CDA app to locate any exhibitor.

6700 Marathon Chair, Summit Dental Systems (booth 1379)

Summit Dental Systems introduces the new 6700M Marathon Chair: The first U.S. dental chair with built-in Wi-Fi, USB access, cloud-based remote diagnostics and NFC technology. The Marathon Chair was designed with operators, patients and technicians in mind and is the intelligent investment for any practice looking for durability and modern technology at an affordable price.

C-Warmer – Anesthetic/Composite Warmer, Dentazon Corp. (booth 339)

The C-Warmer warms composite to improve its flow and warms anesthetic for increased patient comfort. It reduces curing time significantly for doctors’ convenience and has a freely adjustable temperature with digital display. Different-sized ports accommodate various-sized components.

FUSION-DOE Cancer/Caries Fluorescent Imaging System, DentLight (booth 1554)

FUSION-DOE is a CR-proven oral cancer screening light for early diagnosis of abnormal tissues. Released in this...
Case studies
From PAGE 9

n The exact same product is $28.61 at tdsc.com every day, an 18% savings ($6.39).

n Dentists in California and several other states shared their invoiced Eez/Thru Threaders prices with TDSC.

n In a sampling of 15 invoices, the perunit price charged was as high as $35.

Of note, five different major suppliers charged significantly different prices from practice to practice and state to state for the same Eez/Thru Threaders.

These three products are just a small example of the value association members are seeing by shopping online at tdsc.com. Through its price comparison service, the TDSC team is giving practices a clear view of the substantial savings potential on a wide range of supplies and small equipment from the same trusted brands.

For a CDA member with a Bay Area practice, a recent comparison against invoiced prices elsewhere revealed 25% average savings ($1,284.07) for 38 exact-match products at tdsc.com. And, for a Utah Dental Association member with an Ogden-area practice, a tdsc.com comparison against invoiced prices paid elsewhere revealed 49% average savings ($2,939.15) for 33 exact matches.

With negotiated discounts and free shipping on every order, tdsc.com is delivering members of organized dentistry even more opportunities to control overhead costs.

n See how your current prices compare: Request a no-cost custom comparison of your invoices from other suppliers at tdsc.com/pricecompare.

*Price comparisons are made to the manufacturer’s list price as of the date of publication. Actual savings may vary.

**Price comparison based on an actual customer who purchased the exact same product within the past twelve months. All trademarks used herein are the property of their respective owners in the United States and abroad. All prices shown were correct at the time of publication but are subject to change without notice.
upgrade are improved optics for large uniform spot illumination as well as the fluorescent viewer that allows the operator to detect not only soft-tissue but hard-tissue fluorescence for early caries detection.

Launch Chat, PBHS Inc. (booth 1722)

Capture three times the number of patient bookings with Launch Chat. Offer secure and compliant live online reception for your dental and dental specialty website 24 hours a day, seven days a week. After business hours, Live Chat catches leads your office might otherwise have missed by connecting your website visitors to our live staff.

Planmeca Creo C5, Planmeca (booth 1662)

Planmeca Creo C5 is a 3D printer custom-engineered for dental professionals. Planmeca Creo C5 is specified for use in high-speed printing of surgical guides and dental models. The capabilities of this revolutionary high-speed printer include surgical guides or dental models in less than 15 minutes and printing up to five full arches in one print. Easily import STL/PLY files for 3D printing.

QuickPass In-Office Dental Water Test, ProEdge Dental Water Labs (booth 723)

This in-office heterotrophic plate-count water test measures compliance with CDC standard of ≤500CFU/mL and is the only in-office test designed specifically for the dental industry. Neutralization formula within the paddle ensures the most reliable waterline quality results with quick-growing media for in-office results in 48 to 72 hours.

ScanX Classic View Digital Imaging System, Air Techniques (booth 316)

Air Techniques introduces the ScanX Classic View digital radiography system, which enables the intuitive, efficient and time-saving digitization of FSIs for all intraoral formats, sizes 0-4. The Classic View also accepts extraoral pan and Ceph plates. Its large touch-screen, easy-to-use interface and multiple slots for simultaneous scanning contribute to this. The unit is also Wi-Fi capable.

TeleDent 2.0, TeleDent MobileOp, MouthWatch (booth 2330)

TeleDent 2.0 is the newly redesigned turnkey teledentistry platform featuring secure live video, store and forward and internal task management to optimize teledentistry workflows. The TeleDent MobileOp is a fully functioning mobile dentistry unit mounted on a hospital-grade telehealth cart allowing users to provide comprehensive dental care any-time, anywhere.

TQ-601 Soft White Nitrile, Ansell (booth 345)

Nitrile Exam Glove with HYDRASOFT Skin Moisturizing Technology is designed with the patented HYDRASOFT Skin Moisturizing Technology, which is proven to allow skin to retain two times more moisture than gloves without HYDRASOFT technology. The soft nitrile formulation provides a comfortable fit and feel, and it’s thin and lightweight to ensure excellent tactility.

XVWeb 3D, LED Apterxy/VELscope (booth 2237)

The new XVWeb 3D module utilizes cloud technology for accessing, viewing and securely sharing cone beam computed tomography (CBCT) datasets via any compatible web browser in real time. Requiring no downloading of data for image manipulation or enhancement, XVWeb 3D allows practices to access their clinical image data 24 hours a day, seven days a week from compatible web-connected devices.

Exhibit hall hours are Thursday and Friday, May 16-17, from 9:30 a.m. to 5:30 p.m. and Saturday, May 18, from 9:30 a.m. to 4:30 p.m.

Find a complete list of exhibitors along with their products and booth numbers at cdapresents.com/anaheim2019/exhibithall.
Members benefit from new services added to CDA Endorsed Programs

Three new businesses — CommonBond, HR for Health and WEO Media — have been added to the lineup of CDA Endorsed Programs that have been thoroughly researched, vetted and approved by the California Dental Association.

Endorsed Programs is a membership benefit that delivers great value to CDA members by bringing them the lowest prices on products and services that their practices need from vendors they can trust.

CommonBond offers a student loan refinancing program that helps students save money on student debt over time.

CommonBond offers a student loan refinancing program that helps students save money on student debt over time by trading in existing high-interest loans for a single loan with a new interest rate, best-in-class borrower protections and award-winning customer service. CommonBond has a simple application plus special interest-rate discounts and cash bonuses just for CDA members.

With a customizable platform, HR for Health provides dentists the tools they need to optimize the performance of their practices and approach compliance and performance management with confidence. HR for Health’s support team advises dentists who are facing complex employment issues and helps them create sound processes. Additionally, CDA members receive a free HR risk assessment and a 50% discount on start-up fees.

WEO Media’s expert consulting and broad range of marketing services help dentists manage the reputation of their practices and grow and maintain their patient lists. As an Endorsed Program, WEO Media offers CDA members free marketing assessments and discounted start-up costs.

CommonBond, HR for Health and WEO Media join an already impressive roster of Endorsed Programs, which also includes the following businesses and services.

Bank of America – This program offers financial services that are specially designed to help dentists improve their cash flow and facilitate growth in their practices. Services include solutions for dental equipment and office start-up, debt consolidation and loans for real estate and practice acquisition and expansion. CDA members receive up to 50% off loan administration fees.

CareCredit – Dentists who accept the CareCredit health care credit card make it easier for patients to accept treatment when an out-of-pocket investment is necessary. Accepting CareCredit can also help dentists connect to new patients who want to finance treatment. This program offers CDA members a special rate to get started offering health care credit cards to patients.

PureLife – To help members comply with a ruling by the EPA that requires most dental practices to control amalgam waste through the use of ISO-certified amalgam separators by July 14, 2020, CDA negotiated an exclusive price with PureLife to offer the ECO II amalgam separator, which retails for $499, to members for just $99 with a discounted one-year replacement cartridge and disposal service agreement. Members also save 20% or more on services to recycle amalgam scrap that isn’t collected in the separator waste stream.

Staples – CDA members save on office supplies purchased through the Staples Business Advantage Program with special pricing on janitorial and breakroom supplies, technology, furniture, custom printing, promotional products and more. Plus, one-day delivery is free on most online orders. Members can get more information about six of these Endorsed Programs at CDA Presents: The Art and Science of Dentistry in Anaheim May 16-18, where representatives from Bank of America, CareCredit, CommonBond, HR for Health, PureLife and WEO Media will join more than 550 other exhibitors at the nation’s premier dental convention.

Learn more about CDA Endorsed Programs at cda.org/member-resources/endorsed-programs.

Dental anesthesiology recognized as a specialty

Dental anesthesiology has become the 10th dental specialty recognized by the National Commission on Recognition of Dental Specialties and Certifying Boards.

The commission adopted a resolution in March based on an application from the American Society of Dentist Anesthesiologists to recognize dental anesthesiology as a dental specialty. The ADA House of Delegates in 2017 established the commission to oversee the decision-making process for recognizing dental specialties.

Dental anesthesiology now joins the following dental specialties: dental public health; endodontics; oral and maxillofacial pathology; oral and maxillofacial radiology; oral and maxillofacial surgery; orthodontics and dentofacial orthopedics; pediatric dentistry; periodontics; and prosthodontics.

Dental specialties are recognized “to protect the public, nurture the art and science of dentistry and improve the quality of care,” according to the commission’s webpage on ada.org.

Source: ADA News

Advances in dental technologies, materials explored in CDA Journal


The Journal is an award-winning peer-reviewed scientific publication that keeps dentists up to date about scientific advances, business management strategies and new products.

Find this issue and archived issues of the Journal at cda.org/journal.
Dispensing dentists: Warning notice required on opioid prescription labels

A new state law effective Jan. 1, 2019, requires all dispensers of opioids to prominently display a notice on the prescription label or container of any prescription drug containing an opioid. The notice should be displayed by way of a flag or other notification mechanism attached to the container and must state: “Caution: Opioid. Risk of overdose and addiction.”

This requirement, part of Senate Bill 1109, is one of many that prescribers and dispensers must adhere to in an effort by health care providers, prescribers, pharmacists and other stakeholders to reduce opioid abuse and overdose deaths in California. For resources to help with the new requirements and best practices for dental offices, visit cda.org/opioid.

Read more about requirements for prescribers who dispense in “Controlled Substances: Prescribing and Dispensing” available at cda.org/practicesupport.

Becoming a California-licensed RDA

New Practice Support resources can help the required hours of work experience or formal training and dental board-approved courses that must be completed prior to taking the written RDA licensure examination. Final steps for completing and mailing the application are included.

Similarly, “Helping Your Out-of-State-Trained Dental Assistant to become a California-Registered Dental Assistant” outlines the same requirements but is specifically designed for dental assistants who have already received out-of-state training. The specific need for this resource is covered in detail on page 15.

Download the new resources at cda.org/practicesupport.

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Dentists who have hired an out-of-state-trained dental assistant and would like to enable that assistant to become a licensed RDA in California now have a simplified resource to help with that process. The new resource, available at cda.org/practicesupport, clearly defines the two paths that a dental assistant can follow to become a California-licensed dental assistant.

Dental assistants seeking a California license must have met the required hours of work experience or formal training and completed dental board-approved courses in coronal polishing, infection control and the Dental Practice Act prior to taking a written RDA licensure examination. Proof of radiation safety coursework is also required for licensure. The resource includes final steps for completing and mailing the application plus relevant links to applicable forms.

“We were hearing from dentists that they were excited to hire well-trained dental assistants from other states but they and their assistants found it challenging to decipher the steps required to become a California-licensed RDA,” said Michelle Corbo, employment practices analyst at CDA Practice Support. “This resource was designed to help members precisely with this process. The steps to becoming a California RDA are now clearly outlined in a one-page resource.”

Due to dental workforce and broader economic trends, dentists are finding it more challenging to hire and retain qualified dental assistants. While the number of dentists and dental hygienists entering the workforce rose steadily between 2006 and 2016, for example, the number of employed dental assistants dropped considerably, particularly in California’s coastal cities. Nationwide in 2014, that number fell below, and has remained below, the number of employed dentists, according to information published by the American Dental Education Association.

Dental assistants from out of state are therefore an available and ready workforce deterred only by what CDA members say can be a difficult process to California licensure.

These staffing challenges faced by practice owners led the CDA House of Delegates in 2017 to create the 2018 Dental Office Staffing Task Force to study and develop statewide solutions to the shortage of dental office staff and of dental assistants in particular. The new CDA Practice Support resource grew out of this study.

“The task force identified the need to help dentists both hire and keep skilled and loyal staff, and this includes dental assistants trained out of state who want to obtain a California license or advance in their profession,” said Corbo, a task force member. “This new resource is a first tool to help.”

The task force identified and recommended other areas for action, including initiating a project to enable local dental components to share successful local activities and developing materials to help school counselors and other stakeholders promote dental careers in order to “build a dental-assisting pipeline.”

Find the new downloadable resource, “Helping Your Out-of-State Trained Dental Assistant To Become a California-Registered Dental Assistant,” at cda.org/practicesupport.

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The three essential functions of your employee manual

When it comes to your dental practice, one of the most important documents in your HR toolkit is your employee manual. Not only can definitive employee policies resolve disputes, but they can thwart issues before they arise, protecting both the employer and the employee from any sort of misperception and the potential for litigation. Exercising your due diligence is the key to getting the most out of your employee manual.

Your manual’s three essential functions:

1. Protection — your due diligence

First, a well-written employee manual contains objective guidelines for workplace policies, rules and regulations in consideration of federal, state and local labor laws. Additionally, your manual outlines the consequences of policy violations all in one place.

The absence of an employee manual greatly increases the likelihood of an employee filing a suit. After polling an opposing plaintiff’s attorneys about what factors helped them decide to file suit on behalf of current or former employees with complaints, their responses are always the same: It depended on whether the practice had an employee manual.

Practices that don’t have employee manuals are considered proverbial low-hanging fruit for successful lawsuits because it is indicative of potential negligence in other aspects of the business. In other words, if you want to avoid employee legal claims, a manual is one of the simplest yet most effective ways to deter opposing legal counsel from deciding to file a lawsuit in the first place.

2. Consistency — thwarting discrimination claims

Manuals are essential because they emphasize consistency — most importantly, protecting you against discrimination claims, such as retaliation and a hostile work environment. But all situations should be handled objectively and consistently. A manual allows you to outline policies (and the consequences of violating these policies) as they apply objectively to your entire team. Referencing your manual for applications of principles and procedures ensures you are handling all situations consistently and, more importantly, objectively, to avoid high-risk discrimination claims.

Furthermore, your employee manual outlines your practice’s culture. This includes benefits, dress code, punctuality and attendance expectations. Outlining your expectations on these policies is imperative to ensure you are not unfairly or inadvertently singling someone out.

3. Compliance — federal and state-mandated laws

While it is not legally required that you specifically have an employee manual, a manual is the most effective way

Practices that don’t have employee manuals are considered proverbial low-hanging fruit for successful lawsuits because it is indicative of potential negligence in other aspects of the business.

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*AM Best Company rating effective March 2019. For the latest rating, access ambest.com.

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to outline your compliance with legally mandated laws and ordinances. Federal agencies, such as the U.S. Department of Labor, Division of Labor Standards Enforcement and the U.S. Equal Employment Opportunity Commission require business owners to outline rights, such as the Family and Medical Leave Act, whistleblower protections, minimum wage, time off to vote, the Uniformed Services Employment and Reemployment Rights Act, etc.

State agencies also mandate that employers follow local ordinances. In California, employers must distribute 13 policies to each employee regardless of hours worked. One example is the recently imposed mandatory paid sick leave requirement. Legally, all employees are rightfully allowed to review their employer's paid sick leave policy as well as their accrued paid sick leave hours. Having these policies outlined in your manual ensures you are compliant while also informing your team of their rights within each policy and the procedures to exhaust mandated leaves.

The perils of generic manuals

Many times, practices want to use generic manuals provided by their payroll company. Although this may seem to be easy and straightforward, it typically creates more risk than reward. In the compliance world, most things that are low effort and easy tend to prove hazardous. Here's how:

1. All businesses are not alike. Simply copying the contents of another company's employee manual is unlikely to satisfy the particular HR needs of your workforce.

2. You risk not being specific, consistent and objective. Your manual should outline benefits and policies that your practice uses to reference disciplinary action and benefit accruals. By outlining policies in your manual to reference during disciplinary action, you ensure every situation is handled objectively and consistently. Without sound policies in place, how does an employer discipline an employee who has violated an unspecified “rule?”

3. Labor laws change every year. It's imperative that your employee manual is revised to acknowledge these updates. Your employee manual is an ongoing project. Annual updates ensure you do not fall out of compliance.

A powerful tool

If you are not currently using a customized, up-to-date employee manual, you are missing out on a powerful yet easily implemented tool to improve and safeguard your practice. To insulate yourself from future lawsuits, increase productivity and minimize confusion about the policies and regulations affecting your practice, take the time to draft an employee manual. Your manual will serve as your primary defense in everything from day-to-day office disputes to full-blown legal claims. It is a simple, effective way to protect your practice — and yourself.

Build your employee manual with help from CDA

CDA Practice Support is your resource for navigating the business side of dentistry. As part of your CDA membership, you have access to tools and resources such as a Sample Employee Manual template, which lets you build your own employee manual. And new this year is an online Employee Manual Generator. This easy-to-follow tool will guide you through developing a customized and compliant handbook online.

Find resources on employment practices, including tools for developing your employee manual, at cda.org/practicesupport. Preview the online Employee Manual Generator at the CDA Member Benefits Center, booth 1102, or visit cda.org/practicesupport to access the tool now.

Create a customized, compliant employee handbook — online

CDA members can now go online to easily build a customized employee manual for their own practice with the help of a new tool from CDA Practice Support. Powered by HR for Health, a CDA endorsed partner and industry expert, the Online Employee Manual Generator lets users answer a series of guided questions to produce a customized and compliant handbook that can be printed and saved for reference in the practice.

Preview this easy-to-use tool at CDA Presents in Anaheim at the CDA Member Benefits Center, booth 1102, or visit cda.org/practicesupport to access the tool now.

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Students advocate for dentistry, oral health at the state Capitol

Grassroots Advocacy Days are in full swing as student representatives from California’s six dental schools met with their local legislators and legislative staff to discuss critical issues affecting dentistry.

CDA coordinates these small-group advocacy days each year at the state Capitol in Sacramento. The goal is to help members learn about the legislative process and to allow participants to have in-depth, interactive discussions with lawmakers about dentistry and oral health.

“Health care providers hold a privileged place in society,” said Nevatha Mathialagan, a second-year student at the University of California, San Francisco School of Dentistry. “Through advocacy, we have the potential to impact millions of people across the state and nation.”

Student representatives were educated on recent bills and policies currently under discussion in the state Legislature. Brad Morgan, a first-year student at UCSF School of Dentistry, on Feb. 26 met with legislative aides for Assemblymembers David Chiu and Phil Ting and Sen. Scott Wiener. During the visit, they covered topics such as the expansion of dental coverage to more Californians through universal health care and Medi-Cal funding – a critical issue Morgan says he is passionate about.

“Affordable, accessible dental care is out of reach for so many Americans, and we need innovative solutions and smart policy to combat the oral health crisis plaguing our nation,” said Morgan. “This is a shining example of why Advocacy Day is so vital — it increases awareness of the issues among legislators and allows us to present our vision for a healthier California.”

A voice in the legislative process

Students discussed major legislation sponsored by CDA, including Senate Bill 154 (Pan, D-Sacramento). If passed, the bill would add silver diamine fluoride as a Medi-Cal benefit for treatment of dental decay when applied as part of a comprehensive treatment plan.

Also discussed was a package of five bills that aim to reduce the consumption of sugar-sweetened beverages. As of Update publication, two of those five bills are moving forward, and the advocacy campaign will assist CDA's joint effort with the California Medical Association to place a statewide soda tax on the November 2020 ballot.

For Mathialagan, participating in Grassroots Advocacy Days was more than a one-time experience, but an opportunity to learn more about the impact she will have as a dental care provider.

“I learned how professional organizations such as CDA operate and their role in the policymaking process,” Mathialagan said. “As a future dentist, I strive to better understand the voice that I have in the legislative process.”

Leah Andriasian, a second-year student at the Herman Ostrow School of Dentistry of USC, attended Advocacy Day on April 10 with fellow students from her school as well as dental students from the UCLA School of Dentistry, Loma Linda School of Dentistry and the Western University School of Dental Medicine.

“I started learning more about advocacy work last year when I had the opportunity to attend the American Dental Association dentists and student lobby day,” Andriasian said. “As students, I didn't think we could make a difference, but I've come to realize that we are the future of dentistry and it is important that we advocate not only for ourselves but for our future patients as well.”

Andriasian's group had the opportunity to meet with staff members from Assemblymember Richard Bloom's office. “His office was really open to hearing about issues affecting dentistry — it’s great to know that legislators care about what we have to say and are willing to help make a change,” she added.

Understanding the importance of advocacy work and getting involved is a goal that Manpreet Singh believes dental students should strive for. Singh received his Bachelor of Dental Surgery in India and is currently a first-year student in Loma Linda School of Dentistry’s international program. After meeting with Assemblymember Jose Medina, Singh says he is grateful that he and fellow students had the opportunity to voice their opinions to legislators.

“I highly recommend that dental students get involved in advocacy work,” Singh said. “Once you learn about these issues, you are more inclined to get involved to help bring change.”

Grassroots Advocacy Days will continue into the summer, with component dental societies meeting with legislators through June at the Capitol.

Learn more about CDA’s advocacy work at cda.org/advocacy/legislation.
New online form available for reporting dental benefits plan issues

Working with dental benefit plans and other third-party payers can be challenging for many practices. CDA’s Practice Support analysts often hear from members and their practice teams who are experiencing claim miscommunications, denials and delays.

Today, CDA members already benefit from access to guidance from a dedicated dental benefits plan analyst through Practice Support. In addition, members can log in to a library of online resources that facilitate working with benefit plans — from navigating the unique requirements of provider agreements to filing claims efficiently to understanding appeal rights as a dentist. Now, Practice Support is enhancing those benefits with an online submission process for dentists to use to report issues with dental benefits plans.

This new process will enable CDA to continue to facilitate resolution through its expert analysts while giving the association a more defined view of the types of dental benefits plan issues its members face.

To receive assistance, simply submit your issue electronically using the new submission form available online within your cda.org account. Visit My Account, click the link for Dental Benefits Issue Submission and follow the prompts. The intake form will collect basic information about your issue. It is secure, easy to use, HIPAA-compliant and will only take about two minutes to complete. Once submitted, Practice Support will analyze the issue, evaluate it for possible resolution and clearly communicate next steps.

To learn more or submit an issue for resolution, visit cda.org/dentalbenefits.

TDIC earns AM Best ‘A’ rating for 25th consecutive year

The Dentists Insurance Company has earned the AM Best “A” rating for the 25th consecutive year.

AM Best Company ratings include comparisons to peers and industry standards as well as assessments of operating plans, philosophy and management.

The “A” (Excellent) rating is a reflection of TDIC’s financial strength and its mission to provide the best insurance products and related services to more than 24,000 policyholders.

“Our commitment to providing high-quality service is the reason so many dentists trust us with their business,” said Daniel Davidson, DMD, TDIC board chair. “Our consistent AM Best ‘A’ rating is a true testament to our financial stability and goal to protect dentists better than any other insurance company.”

For nearly 40 years, TDIC has upheld its promise of protecting dentists and their practices by consistently reviewing trends, auditing service processes and evolving with changing markets and policyholders’ needs.

TDIC recently merged with Dentists Benefits Insurance Company and Northwest Dentists Insurance Company to extend its exceptional legacy and comprehensive suite of insurance products to policyholders in 15 states.

AM Best Company is a global credit rating agency with a unique focus on the insurance industry. Insurance professionals, brokers, regulators and consumers refer to Best’s Credit Ratings as an opinion of the financial strength and creditworthiness of risk-bearing entities and investment vehicles.

For more information about The Dentists Insurance Company, visit tdicinsurance.com.

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