

**THE DISCIPLINE COMMITTEE OF THE  
ROYAL COLLEGE OF DENTAL SURGEONS OF ONTARIO**

**IN THE MATTER OF** a Hearing of a panel of the Discipline Committee of the Royal College of Dental Surgeons of Ontario held pursuant to the provisions of the Health Professions Procedural Code which is Schedule 2 to the *Regulated Health Professions Act, 1991*, Statutes of Ontario, 1991, Chapter 18 (“*Code*”) respecting one **DR. RICARDO SOLIS**, of the City of Haliburton in the Province of Ontario;

**AND IN THE MATTER OF** the *Dentistry Act* and Ontario Regulation 853, Regulations of Ontario, 1993, as amended (“*Dentistry Act Regulation*”).

Members in Attendance:     Dr. Richard Hunter, Chair  
                                     Dr. William Coyne  
                                     Dr. Peter Delean  
                                     Mr. Ram Chopra

**BETWEEN:**

**ROYAL COLLEGE OF DENTAL  
SURGEONS OF ONTARIO**

- and -

**DR. RICARDO SOLIS**

) Appearances:  
)  
) Ms. Luisa Ritacca  
) Independent Counsel for the  
) Discipline Committee of the Royal  
) College of Dental Surgeons of Ontario  
)  
) Ms. Marie Henein, Ms. Christine  
) Mainville, Ms. Lauren Binhammer  
)  
) For the Royal College of Dental  
) Surgeons of Ontario  
)  
) Mr. Andy Cassolato, Mr. Jeffrey Koza  
)  
) For Dr. Ricardo Solis

Hearing held on July 20, 21, 24, 25, 27, 31, August 1, October 30, December 11, 12, 18, 19, 2017, April 17, 18, 19, 26, 27, 28, May 12, 2018

### **REASONS FOR DECISION**

This matter came on for a hearing before a panel of the Discipline Committee (the “Panel”) at the Royal College of Dental Surgeons of Ontario (the “College”) in Toronto on July 20, 2017. The matter proceeded for nineteen days over the course of several months.

### **THE ALLEGATIONS**

The allegations against Dr. Ricardo Solis (the “Member”) were contained in the Notice of Hearing, dated November 18, 2015. The Notice of Hearing is lengthy and has not been reproduced in these reasons, but is attached as Schedule “A”. The allegations are set out in seven paragraphs. In brief, the College alleges that the Member committed an act or acts of professional misconduct in the following ways:

1. Contravened or failed to maintain the standards of the practice of the profession by taking unnecessary x-rays;
2. Recommended and/or provided an unnecessary dental service (x-rays) relative to one or more of his patients as listed in the Notice of Hearing;
3. Signed or issued a certificate, report or similar document that he knew or ought to have known contained a false, misleading or improper statement;
4. Charged excessive or unreasonable fees for various services;
5. Submitted an account or charge for dental services that the Member knew or ought to have known was false or misleading;
6. Accepted an amount in full payment of an account or charge, that was less than the full amount of the account or charge submitted to a third party payer, without making reasonable efforts to collect the balance from the patient or to obtain the written consent of the third party payer relative to one or more of his patients as listed in the Notice of Hearing; and
7. Engaged in conduct that having regard to all of the circumstances would reasonably be regarded by members of the profession as disgraceful, dishonourable, unprofessional or unethical, by failing to provide complete patient records to the College when requested.

The particulars for each allegation are lengthy and include reference to a significant number of patients. At the outset of the hearing, the parties advised the panel that they had reached agreement with respect to certain particulars. Throughout the course of the hearing, the parties reached additional agreements, but none of the allegations were withdrawn in their entirety and the Member made no admission of professional misconduct, even where he admitted certain facts.

### **THE MEMBER'S PLEA**

The Member denied the allegations as contained in the Notice of Hearing, but did make certain limited admissions with respect to some of the particulars. A number of those admissions were set out in an Agreed Statement of Facts, filed at the outset of the hearing, and attached here as Schedule "B".

### **BACKGROUND**

The Member is the owner and operator of Alcona Dental (the "Clinic"). At all relevant times and in particular, during the years covered by the College's investigation, Dr. Solis employed one or more associate dentists and at least one dental hygienist at the Clinic.

It is the College's position that Dr. Solis improperly accessed his patients' insurance coverage to his and his patients' benefit. The College alleges that Dr. Solis took x-rays that were unnecessary, submitted false and misleading claims to the insurers, billed for services not performed, billed for different services than was provided and billed insurers for one patient when the work was actually performed on another. The College alleges this was done intentionally. The College further alleges that the Member and his staff destroyed or altered records once it became clear to them that the College investigator had uncovered their scheme.

The Member denies that he or his staff did anything to intentionally mislead or take advantage of his patients' insurance coverage. Dr. Solis submits that he did not perform unnecessary dental procedures (i.e. x-rays) or purposely bill for services not performed or bill one patient for another patient's dental work. If there are accounting errors, Dr. Solis submits that they are simply that and he did not direct his office staff to undertake any irregular or inappropriate billing practices. Dr. Solis further submits that many of the concerns raised by the College relate to services rendered by one of his associates, when Dr. Solis was not even present at the Clinic.

### **ISSUES**

This case raises five primary issues:

1. Did the Member engage in professional misconduct in relation to the taking of x-rays? (Allegations 1 and 2)
2. Did the Member engage in professional misconduct in relation to his billing practices? In particular, did he submit an account that he knew or ought to have known was false and/or did he issue a report or similar document that he knew contained false and/or misleading information? (Allegations 3 and 5)
3. Did the Member engage in professional misconduct in relation to billing for services not performed? (Allegation 4)
4. Did the Member fail to collect or attempt to collect co-pays from one or more of his patients? If so, did that amount to professional misconduct? (Allegation 6)
5. Did the Member destroy or alter medical records and/or fail to provide medical records to the College as required? If so, did such conduct amount to professional misconduct? (Allegation 7)

### **Evidence Considered**

The panel heard testimony from eleven witnesses, including a number of former employees of the Clinic, the College Investigator, the Member, his wife, the current office manager and two current patients.

In addition, the panel was provided with a number of patient records, x-rays and other documents.

As will be clear from the panel's reasons below, the documentary evidence was extremely thorough and in most instances provided the panel with the evidence it required to assess the various allegations. While the panel considered the evidence of the witnesses called by both the College and the Member, that evidence was less helpful than the patient records themselves. In the circumstances, the panel did not find it necessary to conduct an in depth consideration of the reliability or credibility of each of the witnesses.

The panel noted that there were a number of the College's fact witnesses who appeared to have difficulty remember what happened during the relevant time period, which made it difficult to accept their evidence. Where possible, the panel based its decision exclusively on the documents presented and did not place significant weight on the evidence of the Member's former employees.

It should be made clear, however, that the panel did consider the Member's evidence and in particular his explanation for the various records and billing discrepancies.

## **The Law and Legal Principles**

### *Burden and Standard of Proof*

The College bears the burden of proving the allegations as against the Member. The College must do so on the civil standard of proof, which is proof on a balance of probabilities. (*F.H. v McDougall*, 2008 SCC 53). Put another way, the College must establish that it is more likely than not that the alleged conduct occurred.

The Court further provided that the burden of proof does not change depending on the seriousness of the case:

In my view, the only practical way in which to reach a factual conclusion in a civil case is to decide whether it is more likely than not that the event occurred. To suggest that depending upon the seriousness, the evidence in the civil case must be scrutinized with greater care implies that in less serious cases the evidence need not be scrutinized with such care. I think it is inappropriate to say that there are legally recognized different levels of scrutiny of the evidence depending upon the seriousness of the case. There is only one legal rule and that is in all cases, evidence must be scrutinized with care by the trial judge. Similarly, evidence must always be sufficiently clear, convincing and cogent to satisfy the balance of probabilities test. (*McDougall*, paragraphs 44-46, 48)

The panel recognizes that it is the College's burden to prove the allegations to the requisite standard. There is no obligation on the Member to disprove the allegations.

## **DECISION**

For the reasons that follow, the panel finds that the Member engaged in professional misconduct as alleged in the Notice of Hearing.

While the panel did not make findings in connection with each particular, it is satisfied that the College has established on a balance of probabilities that the Member engaged in professional misconduct as described in the Notice of Hearing. In particular, the panel finds that the Member:

1. In certain instances, recommended and/or took excessive and/or unnecessary x-rays;
2. Billed insurers for services not performed;
3. Billed insurers under one patient name, for services performed on another patient;

4. Failed to collect or attempt to collect co-pays from patients; and
5. Failed to provide the College with complete patient records as requested.

## **SUMMARY of FACTUAL FINDINGS**

### **Allegation 1 & 2 Unnecessary X-Rays**

#### ***Allegation 1: Failure to Maintain the Standings of The Profession***

#### ***Allegation 2: Recommending or Providing an Unnecessary Dental Service***

The College alleges that Dr. Solis committed professional misconduct by taking x-rays too frequently, without justification and by taking an x-ray that was outside the scope of a dental practice (i.e. an x-ray of a patient's wrist).

It is uncontroversial that in fact, Dr. Solis did take an x-ray of Patient S.I.'s healing fractured wrist. Radiographs of wrists are not considered within the scope of a dentist's practice and as such the Member was wrong to do so.

In support of these allegations, the College filed a number of patient records, which revealed instances where Dr. Solis ordered x-rays, in the absence of a clearly set out reason to do so. There were either no notes or insufficient notes to properly assess whether Dr. Solis had appropriately considered whether the x-rays as ordered were justified in each instance.

The RCDSO Guidelines (Exhibit 6) and ADA Guidelines (Exhibits 5 & 55) clearly specify that the number and frequency of radiographs (i.e. x-rays) taken on a patient must reflect a balance between keeping the number of exposures to a minimum while obtaining an adequate number of radiographs for a complete diagnosis. Radiographs should never be prescribed based on inflexible time periods or on whether they are covered by the patient's insurer. The records filed with the panel do not demonstrate whether the Member in fact undertook the balancing required by the Guidelines. In the absence of clear records, the panel finds that the Member failed to maintain the standards of the profession and in a number of instances recommended or provided unnecessary dental services. Below, the panel has summarized its findings on a per patient basis:

<b><u>Patient</u></b>	<b><u>Records</u></b>	<b><u>Finding</u></b>
B.A.	B.A. is a 13-year old patient. The records indicated that she received 1 panoramic and 8 bitewing radiographs between February 8 and March 5, 2012. There are no dentist or hygiene notes recorded to justify why these x-rays were taken.	Absent a justification in the records, the number of x-rays taken for this patient is not reasonable.
C.B.	C.B. had 17 x-rays taken in a seven month period between July 2008 and February 2009.	There was no justification in the records for the number of x-rays taken for this patient.

	<p>There are no clinical notes available to justify why these x-rays were taken and no notes recording the findings from the x-rays.</p> <p>Further, on June 10, 2013, two bitewings and 2 periapical x-rays were taken. Dr. Solis' explanation for doing so was so that he could check his associate's work. The previous x-rays taken by the associate were available in the file.</p> <p>There was a total of 10 bitewing x-rays taken between February 2012 and June 2013.</p>	<p>The number taken between 2012 and 2013 were clearly excessive.</p>
S ■ C 1.	<p>Two bitewing, two periapical and a Panoramic x-rays were taken of this patient on April 30, 2013. As per ADA Guidelines, the ordinary practice is for one or the other type of x-ray to be taken, but not both (Periapical or Panoramic).</p> <p>Approximately 6 months later, on November 6, 2013, another two bitewings and two periapical x-rays were taken.</p> <p>Another two bitewings and 2 periapical x-rays were taken on May 7, 2014. The records indicate that on his initial check, Dr. Solis noted improvement in the patient's periodontal condition.</p>	<p>According to the ADA Guidelines, either bitewings or a panoramic film should be taken</p> <p>A six month interval is not an acceptable means of monitoring a periodontal condition, and it is particularly unusual to order this number of x-rays where improvement is noted.</p>
S ■ C2.	<p>In a thirty-four month period, twelve bitewings, eleven periapicals and two panoramic x-rays were taken on this patient. The Member explained that this was done to monitor the patient's periodontal condition.</p>	<p>The number of x-rays taken of this patient was excessive and not justified in the patient records.</p> <p>The primary method of assesses a patient's periodontal condition is through periodontal probing and not by taking</p>

		repeated x-rays.
K.I.	This patient was approximately 16-years old during the relevant time period. Ten bitewing x-rays and one panoramic x-ray were taken during a 12-month period (February 27, 2012 to March 7, 2013)	There was no justification in the records for taking this number of x-rays from a young, low risk patient.
M.L.	<p>In the span of six months (2009-2010), there were six bitewing x-rays and ten periapical x-rays taken from this patient.</p> <p>On April 23, 2013, another two bitewings, two periapical and one panoramic x-rays were taken.</p> <p>Similarly, two panoramic x-rays were taken within two to three months of each other in Spring 2014.</p>	<p>There was nothing in the patient's record to justify the need to take so many x-rays in a six month interval.</p> <p>There was nothing in the patient's record to justify the need to take these x-rays in 2013.</p> <p>Dr. Solis acknowledged that the second panoramic should not have been taken.</p>
D. M.	Four bitewing x-rays were taken of this patient within a six month period. There is no explanation in his records for the decision to do so.	There was nothing in the patient's record to justify the need for this number of x-rays in the six month interval.
S. N.	Two or more bitewing x-rays were taken of this patient every year from September 2007 to March 2012. There is nothing the records to explain the reason for the x-rays	There was nothing in the patient's record to justify the x-rays taken.
C.S. 3.	The patient had two bitewing x-rays taken at six month intervals from August 2011 to February 2012 and again in March and September 2013.	There was nothing in the patient's record to explain why bitewing x-rays needed to be taken every six months.
J.T.	The patient had two bitewing and two periapical x-rays taken within a 10-month period. There is a notation in the record indicating that the patient did not want any treatments unless he was in pain.	There was nothing in the patient's record to explain the need for this number of x-rays to be taken within a 10-month period.
G.T.	The patient had two bite wings and one periapical x-ray taken on February 5, 2013. Hygiene notes only mention one	There is no justification in the clinical notes for these x-rays.



	periapical being taken.  Further, the patient had two bite wings and 2 periapical x-rays taken on November 6, 2013. The proposed reason for these x-rays was to check for bone height and caries yet no periodontal probing was performed and there were no notes specific to the absence or presence of caries.	
R.T.	This patient had the same x-rays taken seven months apart.  This patient was suffering with brain cancer at the time and undergoing chemotherapy. There is nothing in the patient record to explain why this seemingly low risk patient would require repeat x-rays.	There is no justification in the clinical notes for these x-rays.
G.Y.	This patient received two bitewing x-rays every year (June 10, 2009, April 7, 2010 and February 23, 2011) for 3 years without any notation as to why they were taken.	There is no justification in the clinical notes for these x-rays.

### **Allegations 3 & 5: False or Misleading Statements and Accounts**

#### ***Exams Not Provided***

The patient records filed revealed that with respect to at least three patients, it appears that the Member billed for examinations that were not in fact provided. The records reveal that work was done on one patient, but billed to a family member's insurer.

**B.G. & L.G.:** The records confirm that dental services were provided to L.G. but the claim to the insurance company was submitted under the name of her husband, B.G. .

The records revealed that by October 2012, L.G. had reached her maximum insurance coverage for the year. Further, the records show that L.G. attended at the Member's office for an appointment and that the claim form submitted for the work done was submitted under B.G.'s name. The records further reveal that B.G. did not attend for an appointment in November 2012.

The inference to be drawn from this evidence is that the L.G.'s dental services were billed on B.G.'s insurance because L.G. had run out of coverage by October 2012.

**S■■ C1. & S■■ C2.** In or about July 2012, records indicate that S■■ C1. received dental services, but a claim was submitted under his wife's name. The records indicate that he received a 37 MO restoration, for which he was not billed. Instead, S■■ C2.'s insurer was billed for the very same restoration.

Similarly, there are notes in S■■ C1.'s records indicating that he attended for a hygiene appointment in July 2012, where he had scaling done and where two bitewing x-rays were taken. These services do not appear to be billed to S■■ C1. or his insurer. Instead, S■■ C2. was billed for hygiene and x-rays in July 2012, but there are no notes in her record to indicate that she received any such service.

The records confirm that S■■ C1. had met his insurance coverage maximum by July 2012. The inference to be drawn from this evidence is that S■■ C1.'s dental services were billed on S■■ C2.'s insurance because S■■ C1. had run out of coverage by July 2012.

**T.I. & J.I.** According to the records, on October 23, 2013 Dr. Solis provided services to J.I. but submitted claims for those services under the name of his mother. T.I.'s insurer was billed for a panoramic radiograph. No panoramic x-ray for T.I. was provided to the College, but a panoramic x-ray taken of J.I. on October 23, 2013 was provided. J.I. was not billed.

The inference to be drawn from this evidence is that T.I.'s insurer was billed for dental work done on her son.

### ***Submitted Claims for Dental Services that were not Provided***

#### **Claims for Examinations**

The College produced records to indicate that on numerous occasions, the Member billed for dental services that do not appear to have been provided. The panel was presented with overwhelming evidence to show that there were little or no records to support the billing in these instances. Where the notes do not confirm that the service was provided, the panel has found as a fact that the services were not provided. This is not a situation where in a few instances, the records do not clearly set out the services provided. In the numerous instances summarized below, there are simply no or deficient records to support the claims for services made by the Member's office.

**C.B.:** On June 10, 2013, the patient's insurer was charged for dental services, including a complete examination. There are no notes from Dr. Solis in the record to confirm that a complete examination was performed. An appointment requisition form confirms that the patient attended on the day in question for a recall examination, which is different from a complete examination. The billing codes for each type of examination is different.

Further, the hygienist's notes make no reference to a complete examination having taken place and it appears that the amount of time scheduled for the appointment would not have permitted a complete examination to have taken place.

On January 28, 2014, the patient's insurer was charged for a recall exam and other dental services. The hygiene notes on file make no mention of a dentist having come in to perform any

type of exam on the patient. Instead, the notes indicate that the hygienist *would* show Dr. Solis the patient's x-rays and provide him with an update on the patient's gingival and periodontal status. The appointment calendar shows that Dr. Solis was out of the office for the entire day, and there were no dentist's notes to confirm that a recall exam was performed.

**B.C.:** On May 21, 2013, the patient's insurer was billed for a specific examination. B.C. is not listed in the appointment calendar and there are no hygiene or doctor notes to confirm that this exam was performed.

On August 19, 2013 a claim was submitted to the patient's insurer for a periodontal re-evaluation that does not appear to have been performed. The hygiene notes do not say that a dentist performed a periodontal re-evaluation on this patient. While it appears that the hygienist placed a check-mark beside "perio re-eval" on a preprinted form, there are no notes in the patient's record to indicate that the dentist in fact performed a periodontal re-evaluation.

On November 14, 2013, a claim was once again submitted to the patient's insurer for a periodontal re-evaluation. There are no dentist's notes to confirm whether such an evaluation took place and there is nothing in the hygiene notes to indicate that a dentist was present for the evaluation. Although the hygienist may have done her own assessment a dentist is required to do a periodontal re-evaluation.

**W.C.:** On February 19, 2013, a claim was submitted to the patient's insurer for a recall examination. There are no dentist or hygiene notes for this date to confirm whether such an examination took place or even whether the patient attended the Member's office at all.

**B.F.:** An insurance claim was submitted on February 16, 2012 for a periodontal re-evaluation for this patient. The hygiene notes do not indicate that such an evaluation took place. Instead, the notes indicate that the patient attended for a periodontal scaling. There was no updated periodontal charting found in the notes for this date, and the appointment calendar suggests that no dentist was present when Mr F [REDACTED] was seen. This patient was more likely seen by a hygienist and not a dentist, despite what was submitted to the insurer.

**K.G.:** A claim for a periodontal re-evaluation was made on February 1, 2012. There is nothing in the hygiene notes to indicate that a periodontal re-evaluation was performed by a dentist. Instead, the notes are consistent with the visit being a 3-month recall appointment.

**L.G.:** On January 5, 2009 a claim was submitted to the patient's insurer for a recall exam. Hygiene notes do not indicate that a recall exam was performed by a dentist. There are no doctor's notes indicating an exam was performed at all. Although local anesthetic administration was performed by Dr. Solis it does not confirm that an exam was also performed.

**K.I.:** On May 7, 2007 Dr. Solis was the attending dentist. A claim was submitted under this patient's name for panoramic and cephalometric x-rays, but no x-rays were provided to the College and there is no mention of taking x-rays in the Member's notes.

On December 1, 2008 the patient's insurer was billed for two bitewing radiographs, hygiene treatment, polish and fluoride. There are no progress or hygiene notes available for this date.

The appointment requisition form indicates that the patient's December 1<sup>st</sup> appointment was in fact cancelled. There is nothing to suggest that it was rescheduled.

Similarly, on June 15, 2009 the patient's insurer was billed for fluoride treatment. She was seen by Joanne Evenden the hygienist, who had no specific recollection if she provided a fluoride treatment and her notes did not indicate it was in fact provided.

**M.L.:** On June 19, 2013 a claim was submitted to the patient's insurer for a specific exam. There are no hygiene or dentist notes for this date. An appointment requisition form indicates that this appointment was for a crown insert and Dr. Solis's notes from the previous appointment also state that the next visit would be for a crown insert. The panel does not accept that a specific exam was performed on this date.

**V.R.:** On January 26, 2008 a claim was submitted to the patient's insurer for an limited examination as well as other hygiene services. Hygiene notes do not confirm that an exam was performed and there are no dentist notes to support the billing.

**B.S.:** On January 13, 2011 a claim for an examination was submitted to the patient's insurer. There are no hygiene or dentist notes for this date. There is simply nothing in the file to confirm that the patient received any care on the date in question. .

Similarly, on December 6, 2011 a claim for an examination was submitted to the patient's insurer. There are no hygiene or dentist notes to confirm the examination took place. According to the appointment calendar, the patient was booked to see Dr. Solis' as his last patient for the day. The booking was scheduled for a 30-minute appointment. The insurer was billed for one hour worth of services.

Finally, on February 29, 2012 a claim was submitted to the patient's insurer for a specific examination, two periapical x-rays and two units of scaling. The two periapical x-rays were not provided to the College and so there is no evidence before the panel to confirm that they were in fact taken. Further, there are no hygiene or dentist notes to confirm that this patient attended on February 29<sup>th</sup> and in fact his name does not appear on the appointment calendar for that date

**C.S1.:** On February 29, 2012 a claim was submitted to the patient's insurer for an examination as well as other dental services. There are no hygiene or dentist notes to confirm any of these procedures actually took place. Further, the patient does not appear in the appointment calendar.

In addition, on August 8, 2012 a claim was submitted to the patient's insurer for a recall examination, two bite wing x-rays, two periapical x-rays, polish, scale and fluoride. The hygiene notes do not confirm that a dentist performed any dental services on this patient. The patient was only scheduled for a 45-minute appointment with the hygienist, which would likely not have been enough time to complete all of the services that were billed.

**A.S.:** On May 30, 2012 a claim was submitted to the patient's insurer for a periodontal re-valuation. The hygiene notes do not indicate that such a re-evaluation was done by a dentist. The notes seem to indicate that the patient received a 3-month recall check, and not a periodontal re-evaluation, which is a longer and much more extensive examination.

**J.T.:** On May 2, 2011 a claim was submitted to the patient's insurer for an examination. There are no notes in the records provided to confirm that any such examination took place. Although Dr. Solis thought this patient might have seen Dr. Trotti, the appointment schedule says "Dr. S will be here".

**R.T.:** On April 11, 2012 a claim was submitted to the patient's insurer for an examination, two periapical x-rays, four bitewing x-rays, polish, three units of scaling and fluoride. None of the x-rays billed were found in the patient's file. There were no notes to indicate that the patient even attended the office that day and the appointment calendar indicates that both Dr. Solis and his hygienist were fully booked with other patients.

**S. W1.:** On May 3, 2011 a claim was submitted to the patient's insurer for a periodontal re-evaluation. Hygiene notes do not confirm that a periodontal re-evaluation took place. The notes refer to the treatment being planned by Dr. Solis, but not that any such treatment took place. Dr. Solis testified that he thought his associate might have seen Mr. W. but Mr. W. testified that he only saw Dr. Solis.

Similarly, on November 2, 2011 a claim was submitted for a periodontal re-evaluation. Hygiene notes do not confirm that a periodontal re-evaluation took place. There are no notes from the dentist on file

**S. W1.:** On March 3, 2010, a claim for a complete examination was submitted to the patient's insurer. The records indicate that the patient attended on March 3<sup>rd</sup> for a recall examination instead. There is nothing in the records to support the submission of a claim for a complete examination in the circumstances and the panel rejects Dr. Solis's premise that the actual bills generated are the most accurate documents with respect to work actually done. The bills are not included in the patient's files. The medical notes are to be used to record the patient's health and the various procedures done and observations made during the course of treatment.

**S. W2.:** On January 25, 2011 a claim was submitted to the patient's insurer for a recall examination. The patient's appointment was booked at 4:30 pm when, according to the appointment calendar neither Dr. Solis or his associate, Dr. Trotti, were present. The hygiene notes record "DMD (Dr. Solis) to check", but there is nothing in the records to confirm that the patient was in fact seen by a dentist at all.

**G.Y.:** On or about November 24 and 28, 2011 a claim for an examination was submitted to the patient's insurer. There are no notes to substantiate that an examination took place by a dentist.

#### **Various Services not provided to S. C2. and Her Family**

**S. C2.:** She testified on the Member's behalf at the hearing. While her evidence was wholly supportive of Dr. Solis, she could not explain the billing issues identified by the College from a review of her family's dental records. Much like the records for other patients, there were numerous instances in her family's records wherein her insurer was billed for services for which there is no record that they were provided. On March 21, 2012, S. C2.'s insurer was billed for a recall exam, oral hygiene instruction, x-rays, scaling, polish and fluoride treatment. Dr. Solis was the only dentist in the office on that

date. There are no hygiene or progress notes for this visit and the x-rays billed were not in the file and could not be located.

On September 24, 2012 this patient's insurer was billed for a recall exam, oral hygiene instruction, x-rays, scaling, polishing and fluoride treatment. S■■■ C2.'s name does not appear on the appointment schedule and the hygienist is fully booked with other patients. Further, there are no dentist or hygiene notes for this date and the x-rays billed were not in the file and could not be located.

On February 19, 2013 a claim was submitted to this patient's insurer for a specific exam by Dr. Solis. There are no dentist or hygiene notes for this date. The appointment does not appear on the appointment requisition sheet.

Finally, on June 3, 2013 desensitization was billed to S■■■ C2.'s insurer by Dr. Solis. The notes on file do not indicate that desensitization was in fact provided.

The allegations related to January 6, 2011, August 11, 2011, September 8, 2011 and January 8, 2013 result from billings on days when it appears that the Member's associate was in the office. In the circumstances, it is not clear which dentist was responsible for treating the patient. As a result, the panel makes no findings of fact against the Member for these specific dates.

D.M., is S■■■ C2.'s son. This patient's insurer was billed on May 7, 2013 for a recall examination, oral hygiene instruction, radiographs, scaling, polishing, fluoride and desensitization. There are no dentist or hygiene notes for this date. The radiographs billed for this date are not in the file. D.M. was not listed in the appointment calendar and this particular appointment does not appear on the patient's appointment requisition sheet.

On July 4, 2012 claims were submitted to this patient's insurer for a periodontal re-evaluation, oral hygiene instruction, scaling and desensitization. There are no dentist or hygiene notes for this date. The appointment requisition form from May 2012 states that the patient's next visit was for November 2012, not July 2012.

S■■■ C1. is S■■■ C2.'s husband. On October 6, 2010 this patient was billed for periodontal irrigation. There are no hygiene notes to confirm that this procedure was performed. In fact, the notes state that the gingiva was firm and pink with no bleeding points, suggesting that irrigation would not have been necessary.

The allegations relating to September 9, 2010, January 17/20, 2011, September 19, 2011, March 12, 2012 and March 20, 2012 result from billings on days when the associate was in the office. It is not clear which dentist was responsible for treating the patient. As a result, the panel makes no findings against the member.

### **Claims for Gingivectomies Not Performed**

The records reveal that at least with respect to two different patients, insurance companies were billed for gingivectomies that were not in fact performed. The panel notes that there were no notations in the records reviewed describing the procedure at all. This is unusual in that you would expect to see detailed notes for this sort of procedure.

In the case of G.L., his insurer was billed for a gingivectomy following an appointment on March 10, 2011. The records indicate, however, that the patient attended the office for teeth whitening. The treating hygienist testified that she remembered providing the patient with teeth whitening and neither the Member nor Dr. Trotti, his associate, remembered performing a gingivectomy on this patient.

Similarly, patient T.B.3's insurer was billed for a gingivectomy on October 6, 2009. The patient's records were not available to the College, but the appointment schedule indicates that the patient was present for a "crown prep". While Dr. Solis testified that he remembered performing a gingivectomy on this patient, the information in the appointment schedule indicates otherwise.

The allegations related to A.B. on March 3, 2011 and K.L. on March 7, 2011 result from billings on days when the associate was in the office. It is not clear which dentist was responsible for treating the patient. As a result, the panel makes no findings against the member.

### **Claims for X-Rays**

The panel received a number of records confirming that the Member's patients were billed for x-rays which were not in the patients' file and which have never been provided to the College for verification. In the circumstances and given the number of instances where x-rays were billed, but are missing, the panel finds that the x-rays were not taken as billed. In particular, the panel finds that the following patients' insurers were billed for x-rays which were not taken:

<b>Patient</b>	<b>Date X-Rays Billed</b>
A.B.	February 12, 2009; March 17, 2011
T.B3.	June 4, 2009; January 26, 2011
D.C.	August 27, 2012
B.G.	November 14, 2012
T.I	October 29, 2013
G.L.	May 25, 2011
B.S.	December 6, 2011; February 29, 2012
S.S.	January 13, 2011
R.T.	April 11, 2012

The following list patients were treated and billed on days when the associate was in the office. It is not clear which dentist was responsible for treating the patient although the billing was in Dr. Solis's name.

B.A. - March 5, 2012

A.B.- September 29, 2011

T.B3. - July 28, 2011, October 31, 2011

T.B3. - March 5, 2012

D.C. - August 27, 2012

B.C. - March 31 or April 4, 2011

B.G. - March 22, 2011

L.G. - May 24, 2011

L.G. - April 2, 2012

M.K. - July 27, 2010

G.L. - February 27 or 28, 2012

K.L. - August 16, 2011

D.P. - October 25, 2010

P.T. - September 18, 2012

G.T. - April 30, 2012

In the circumstances, the panel makes no findings with respect to these specific patient x-rays.

The following list of patients and dates are days when an associate is present in the office providing treatment. The lack of dentist's notes precludes the panel from determining who was responsible for attending to the patient and as such the panel makes no findings with respect to these patients.

D.C. - On August 27, 2012

L.G. - April 2, 2012

B.C. - February 6, 2013

R.J. - March 19, 2012

L.L. - April 5, 2012

B.C. - March 31 or April 4, 2011

S.W2: The allegation of misconduct on June 11, 2013 occurred on an associate (Dr. Mason) day. It is not likely that the claimed services were provided by Dr. Solis. The panel makes no findings against the member.

### **Claims for Local Anesthetic in Conjunction with Scaling**

The records indicate that with respect to at least 18 patients, Dr. Solis made a claim to his patients' insurers for the administration of local anesthetic when performing scaling. The Ontario Dental Association (ODA) Fee Guide makes clear that dentists cannot charge for local anesthetic when performing operative or surgical procedures. As set out in the ODA Practice Management article filed with the panel, scaling is an operative procedure and as a result the administration of local anesthetic when performing scaling is not a billable procedure.

Dr. Solis acknowledged that the majority of the patients were treated by him. The panel finds that he is responsible for the erroneous billing connected to the patients under his care whose insurers were billed for both scaling and local anesthetic.



### Dental Services Billed in Place of Other Services

S C1:

In addition to the claims for gingivectomies which were not performed as described above, the Member's records revealed that on several other occasions, the Member's office staff would bill insurers for services not performed in place of services actually completed. As described above, S█ C1. received whitening treatment which was billed to the insurer as a gingivectomy in October 2010.

Similarly, in April 2012, the records indicate that S█ C1.'s insurer was billed for a flap approach with ostectomy and tooth color restorations. There are no dental notes relating to a surgery or restorations. The records do, however, include a lab prescription dated April 4, 2012 for veneers for this patient. The panel heard from various front desk employees who confirmed that S█ C1. received veneers. Given the testimony from the front desk employees and based on the records, the panel finds that S█ C1 received veneers instead of tooth coloured restorations in conjunction with a surgical flap and ostectomy, which was billed to his insurer.

S C2:

S█████ C.2's insurer was billed on March 24, 2011 for a gingivectomy. The appointment calendar records that S█████ C.2 attended for scaling and whitening. The hygiene notes do not mention a gingivectomy and she was not billed for anything other than the gingivectomy. The patient testified that Dr. Solis popped in while she was getting her teeth cleaned and decided to do a quick gingivectomy. The panel had difficulty accepting that this patient would have even know what a gingivectomy is. ██ had no dental experience. Even Dr. Solis testified he thought hygienists could perform this procedure. A gingivectomy is a surgical procedure which can be performed by only a dentist. Also, the patient's evidence does not accord with the records. The panel does not accept the patient's evidence with respect to this visit. ██ Her description of the services is unreasonable and not in line with the records, which make no mention of a gingivectomy. Further, the patient's evidence does not provide an answer for why she or her insurer was not billed for the other services performed at that appointment.

T.S:

Finally, the billing records suggest that T.S. attended appointments with Dr. Solis on November 7 and 14, 2012. On November 7th, T.S.' insurer was billed for an emergency examination and desensitization. On November 8<sup>th</sup>, her insurer was billed for a recall examination, x-rays, scaling, polish and oral hygiene instruction. There are no dentist or hygiene notes for the emergency examination, desensitization or recall appointment. There is a note dated November 17, 2012 stating that the patient had bleaching (whitening). The patient is not on the appointment calendar on November 7 or 14, 2012. There is a note in her file from May 2015 that indicates that the patient had previously received whitening. It appears that the patient was never billed for teeth whitening.

### **Claims with Incorrect Dates for Service**

The panel received records to indicate that with respect to patients C.B., B.C., K.I., and S.I., the Member filed claims with insurers listing the incorrect date for the services provided. In certain instances, the claims were made before the treatment was provided and in other instances, the claims were made well after.

The following list patients were treated and billed on days when the associate was in the office. It is not clear which dentist was responsible for treating the patient although the billing was in Dr. Solis's name. The panel makes no findings against the member.

B.A. - December 21, 2010

T.B.2 - December 22, 2010

B.C. - March 31, 2011

L.G. -December 12, 2011 and September 2012

T.M. -July 2012

### **Claims for Periapical X-rays when Bite Wings Taken:**

The panel reviewed records which established that with respect to at least eight patients, insurance claims were made for periapical x-rays, when only bitewing x-rays were in fact taken of the patients. The records made clear that Dr. Solis was present in the office during the appointment times. Below is a list of the patients and a brief description of the billing discrepancy.

<b>Patient</b>	<b>Description of Discrepancy</b>
C.B.	On November 26, 2012 the patient's insurer was billed for two bitewing x-rays and two periapical x-rays. The records indicate that in fact four bitewing were taken and no periapical x-rays.
F.C.	On April 30, 2012, the patient's insurer was billed for two bite wings and two periapical x-rays. There were no periapical x-rays on file or provided to the College. The records indicate that in fact four bitewing x-rays were taken that day.
B.G.	On March 22, 2011, the patient's insurer was billed for two bitewing and two periapical x-rays. It appears from the x-ray records and the hygienist's notes taht in fact four bitewing x-rays were taken and no periapicals.
C.S. ■. 3	On March 6, 2013, two bitewing x-rays and one panoramic x-ray were taken of the patient. Those x-rays were in the file and made available to the College. However, it appears that for the purposes of billing, the patient's insurer was

	billed for periapical x-rays, even though none appear to have been taken that day.
A.S.	On March 26, 2013 a claim was submitted for two bite wing and two periapical x-rays. Four bite wing x-rays were in the patient's file and were provided to the College. There were no periapical x-rays matching the patient's March 26, 2013 billing.
J.T.	<p>The patient's insurer was billed for two bite wings and two periapical x-rays on May 2, 2011. There were no periapical x-rays in the patient's file and in fact the file contained and the College was provided with four bitewing x-rays instead.</p> <p>Similarly, on December 2, 2013 a claim was made for four periapical x-rays. It appears from the records, however, that only two bitewing and two periapical x-rays were in fact taken of this patient. This is consistent with the x-rays provided to the College and with the hygiene notes on file.</p>
P.T.	On May 7, 2013, the patient's insurer was billed for two periapical x-rays. There were no such x-rays in the patient's file for May 2013. However, there were two bitewing x-rays in the file for May 7 <sup>th</sup> , and the hygienist's notes confirm that two bitewings were taken.

The records revealed several other instances where the wrong type of x-ray was billed to patients' insurers. Where it was clear in the record that Dr. Solis' associate was the treating dentist, the panel makes no findings against the Member.

With respect to patients, S.I. and C.S., the Member admitted that the wrong billing codes were entered for the x-rays taken of these patients on March 26, 2007 and August 8, 2012, respectively.

The following list patients were treated and billed on days when the associate was in the office. It is not clear which dentist was responsible for treating the patient although the billing was in Dr. Solis's name. The panel makes no findings against the Member with regard to these patients.

C.B. - February 13, 2012

D.C. - February 23, 2012

S■■ C.2 - May 19, 2011

B.F. - August 20, 2012

B.G. - October 6, 2011

B.G. - May 14, 2012  
 L.I. - Nov 6, 2012  
 K.I. - February 14, 2011  
 K.I. - August 22, 2011  
 K.I. - September 6, 2012  
 M.L. - July 19, 2011  
 M.L. - July 17, 2012  
 D.M. - May 7, 2012  
 S.N. - September 15, 2011  
 D.P. - October 25, 2010

#### **Allegation 4: Charging Excessive or Unreasonable Fees**

These allegations overlap with Allegations 3 and 5 which have been dealt with above. Where the panel has found instances of billing discrepancies, it found that those discrepancies resulted in a charge of an excessive or unreasonable fee. The records reviewed and summarized above, indicate that the Member's billing practices resulted in excessive charges for treatment not performed and/or not insurable. In addition to the patient treatments and charges discussed above, the panel found that the following charges were excessive and unreasonable in the circumstances.

<b>Patient</b>	<b>Summary of Excessive Charge</b>
S. W.1	On March 3, 2010, the patient's insurer was charged for a complete examination, where only a recall examination was performed.
K.I.	<p>Claims totaling \$1900 for orthodontic treatments were submitted in 2007 and 2008 for this patient. The only notes from those dates state that Dr. Solis proceeded with an orthodontic evaluation on May 7, 2007. There are scant notes regarding the proposed treatment (Exhibit 4, Vol. 3, Tab 23A, p. 1770). There is reference to K.I. receiving a Hawley appliance in April 2007, but there are no other records indicating any other orthodontic treatment was provided that would justify the fees charged.</p> <p>There is another excessive charge allegation with respect to this patient for February 12, 2012. The records indicate, however that Dr. Trotti was the attending dentist for that appointment. As such, the panel makes no finding against the Member</p>

	with respect to this particular entry.
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#### **Allegation 6: Failure to Collect Co-Pays**

The College alleges that Dr. Solis failed to collect co-payments or deductibles from patients, did not make reasonable efforts to collect these co-pays and deductibles, and did not have the insurer's consent not to collect.

Robin Viera, Eileen Murphy and Monica Alves who were front desk staff, all testified that Dr. or Mrs Solis did not want to collect co-pays from family, friends and older patients. When S [REDACTED] C [REDACTED] [REDACTED] the policy changed and they began collecting co-payments. This was confirmed by Rhonda Scott.

The records indicate that with respect to four patients (A.B., K.I., J.J., and B.S.) the Member failed to collect co-payments or failed to make any effort to do so. The Member argued that with respect to B.S., his mother provided cleaning services to the office in exchange for a waiver of the co-payment. There was no evidence before the panel confirming this arrangement. None of the other witnesses were able to confirm the arrangement and B.S.' mother was not called to testify.

#### **Allegation 7: Failure to Provide Records to the College**

The College alleges that Dr. Solis engaged in conduct or performed an act or acts that having regard to all circumstances, would reasonably be regarded by members of the profession as disgraceful, dishonourable, unprofessional or unethical. The basis of this allegation is Dr. Solis's failure to provide the College with complete records for fourteen patients, whose records were requested by the College.

The Member did not contest that part of the records for these fourteen patients were sought and not received by the College.

### **REASONS FOR DECISION**

#### ***Allegations 1 & 2 – Excessive X-rays***

Dr. Solis' patient records reveal that he failed to maintain the standards of practice by taking unnecessary x-rays and in one instance, taking an x-ray outside of the scope of dentistry.

The RCDSO (Exhibit 6) and the ADA Guidelines (Exhibit 5 and 55) specify that a balance between minimizing the number of radiation exposures and obtaining an adequate number of x-rays for a complete diagnosis is the goal when examining a patient. The type and frequency of x-rays should be based on the individual patient's clinical signs, symptoms and past dental history. They should not be prescribed based on inflexible time intervals.

It was evident from the records that the Member did not conduct an individual assessment of the appropriateness of taking x-rays on a patient by patient basis. For the most part there was nothing or very little in the clinical notes to support the x-rays ordered. In most cases, there were

no notes from the Member or his hygienist to explain why the x-rays were taken or whether any sort of disease or condition was found. The panel was not prepared to simply rely on the Member's memory of why he believed the x-rays were necessary in each case. The clinical notes must reveal the rationale for the x-rays. Where they do not, the panel could only conclude that the Member failed to follow the College and ADA Guidelines in balancing the need for the x-rays with the desire to minimize radiation exposure for the patient. It was apparent from the records that most of the patients received x-rays on an inflexible time period. That is to say, if their insurance covered a specific type of radiograph every six months the patient would have those x-rays taken in that time frame without justification.

### ***Allegations 3 & 5: False or Misleading Statements and Accounts***

Allegations 3 and 5 related to a variety of billing discrepancies. As described above, the Member's records reveal a pattern of problematic and false billing, when taken in totality establish that the Member engaged in billing practices that he knew or ought to have known contained false and misleading information. It appears this was done to maximize recovery from the patients' insurers.

#### **A. Submitted Claims for One Patient Under the Name of Another**

As discussed above, the records established that on more than one occasion, a patient's insurer was charged for treatment performed on another patient. The information in the records was corroborated by two former front desk staff who testified and were able to recall that they processed billings for one family member under the name of another family member.

For example, Eileen Murphy testified that the office staff would sometimes bill services that were provided to A.B. under her husband's name and vice versa, if one had run out of benefits for the year. She also testified that Dr. Solis provided a lot of work for A.B.'s nephew, who did not have insurance. The office staff were instructed to bill the work performed on him under A.B.'s and T.B.3's names.

Similarly, Rhonda Scott testified that services provided to S■■ C.1 were billed under his stepson's name and services provided to L.G. were billed under her husband's name for insurance purposes.

#### **B. Submitted Claims for Dental Services that were not provided**

The panel concluded that if a claim was submitted for a service or treatment that was not supported by the clinical notes or records, then the only inference to be drawn was that the service was not provided as billed. Maintaining complete and accurate records is a key component of any professional's practice and the lack of documented evidence to support the numerous insurance claims weighed heavily on the panel's decision.

#### **Claims for Examinations**

Upon review of the patient records and upon hearing from several former employees, it was clear to the panel that in many instances examinations were billed to insurers, but were not in fact

provided. The panel was satisfied that this problematic conduct was systemic for several years. The testimony of the various staff members with respect to this issue was credible and consistent with the clinical notes and billing records.

#### Various Services Not Provided to S■■ C.2

Dr. Solis was the primary provider of services to S■■ C. 2 Dr. Trotti testified that S■■ 2 preferred to see Dr. Solis and so at a minimum he would have been involved closely with her care. He therefore knew or ought to have known that services were being billed to her insurer that were not in fact provided. S■■'s2 insurance was billed for a number of services - from hygiene, to exams - of which there is absolutely no record: no notes or x-rays on file. Dr. Solis must have noticed that there were gaps in S■■'s2 records and certainly, even if he was not directly responsible for the erroneous billing, a reasonable practitioner following this patient's care ought to have noticed and corrected the deficiency.

S■■ C.2 testified that everything billed to her insurance was provided. She was quite adamant about knowing every detail of her appointments. The panel had difficulty accepting the S■■'s2 evidence in this regard. It is hard to imagine that any patient would have the ability to recollect every single service provide at every appointment. S■■ 2 ■■■■■■■■■■ close friend of Dr. Solis and his wife. It was clear that she testified in a manner that she believed would be most helpful to the Member. This impacted her reliability and credibility. She refused to concede simple points and appeared to have an answer for every erroneous record or deficiency.

S■■ C.2 testified as to her involvement in gathering the patient records for the College investigator. She indicated that she believed that the complete files were provided and that nothing was missing. This evidence was contradicted by the testimony of the investigator, who confirmed that portions of the records were missing and further contradicted by S■■ C.'s2 letter to the College wherein she acknowledged that portions of the records that were delivered were missing. The suggestion that the patient files were complete when they were provided to the College is not plausible.

#### Various Services Not Provided to S■■ C.1 and D.M.

S■■ C.1 is S■■'s2 husband and D.M. is her son. They both were Dr. Solis' patients. Dr. Solis was closely involved in D.M.'s care in particular and knew or ought to have known as a result of his involvement that on numerous occasions D.M.'s insurer was billed for services not provided.

At the very least, Dr. Solis ought to have noticed that there were gaps in the patient's records and made the appropriate inquiries of his staff

Similarly, Dr. Solis was directly involved in S■■ C.1's care. They were family friends. Dr. Solis either knew or ought to have known that on numerous occasions there were services billed to S■■ C.1's insurer that had not been provided. At the very least, a reasonable practitioner in Dr. Solis's circumstances would have noticed the series of gaps in the patient's records and made inquiries to find out what happened.

### Claims for Gingivectomies

As set out above, the records indicate that with respect to at least some gingivectomies were billed to patients' insurers, but it does not appear that the treatment was in fact provided. The records are consistent with the evidence of Dr. Trotti, the Member's associate, who testified that she did not perform a gingivectomy on any patient at the Member's Clinic. It is also consistent with the Member's testimony that he did not perform gingivectomies on K.L. or G.L., even though their insurer was billed for same.

The Panel heard evidence that whitening costs \$400.00, which is about the same amount that can be charged for a gingivectomy or scaling appointment. Robin Viera and Rhonda Scott testified that as front office staff, they were instructed to bill for a gingivectomy when a whitening treatment was provided, because typically whitening was not a insurable benefit.

### Claims for X-rays

The panel finds the Member responsible for the overbilling and billing errors associated with the x-rays. There are three main reasons that the Panel considered when making this decision:

1. There were simply too many x-rays missing from too many patient charts for this to be a case of a simple filing error. The assertion that if an x-ray was billed, it must have been taken and accidentally misfiled is not reasonable. The evidence from Dr. Solis' associate confirmed that the x-rays were saved in digital form so that the treating dentist could access them in the operatory. Assuming that is correct, it would make it almost impossible to lose the x-rays if they were in fact taken. Similarly, Sandra Duckworth, another former front desk employee, testified that the paper copies of the x-rays were supposed to be placed in the patient's file. While they might have occasionally been misfiled, the electronic copies should have been readily available.
2. It is highly unlikely that a dentist would not notice so many missing x-rays. It would make proper patient treatment impossible without taking new radiographs.
3. With respect to many of the missing x-rays described above, it is clear that multiple x-rays were often billed for one visit and that only some have gone missing. This certainly suggests that if there was a problem of misfiling, then all of the x-rays for a patient on a given day would be missing. Instead the only reasonable inference to draw is that where the x-rays are missing, they were in fact not taken at all.

### **C. Billed or Submitted False or misleading Claims**

The records indicate that on several occasions, the Member's patients were billed for one type of service, when another type of service was in fact performed. For the most part, these included claims submitted for complete examinations, when on a recall examination was provided.

Dr. Solis testified that the actual bills generated are the most accurate documents with respect to determining what treatment was provided. The panel does not accept this position. The clinical notes of the dentist and hygienist are the record of the services provided and treatment performed. When detailed clinical notes are absent, it is impossible for the treating dentist on the next visit to determine what needs to be done and it makes no sense that one would have to



look at the billing records to determine a patient's treatment history. The absence of clinical treatment records makes it impossible to cross reference the accuracy of billed procedures.

The panel rejects the suggestion that the complete examinations were conducted, where the records indicate they were not. The clinical notes and records make clear that in very many instances, the insurer was billed for a complete examination, where a recall examination is noted and where there would not even have been enough time to conduct a complete examination.

Dr. Solis is responsible for these billing irregularities as the treating dentist and clinic owner.

#### Billed for Local Anesthetic in Conjunction with Scaling

Dr. Solis submitted numerous claims for the administration of local anesthetic prior to scaling. According to the Ontario Dental Association Fee Guide and an ODA Practice Management article this is not a billable procedure. Dr. Solis admitted he was the attending dentist and charged patients for the administration of local anesthetic (ASF, pp 16-17, II-37).

#### Claims with Incorrect Dates of Service

On a number of occasions dates on insurance claim forms were incorrect. The Panel accepted that occasional errors may occur, but it became apparent that in this case there appeared to be a conscious effort to submit claims either early or late to maximize insurance coverage. Again, there were simply too many occasions where this occurred to accept that these were simply innocent clerical errors.

Further, the evidence of Robin Viera and Eileen Murphy was revealing. They both testified that on occasion they were instructed to manipulate the dates of service to maximize insurance coverage. This was consistent with the records which contained the date errors.

#### Claims Submitted for Periapical X-rays when Bite Wings Taken

Dr. Solis generally acknowledges that incorrect claims were made, and that on occasion bite wings were taken but periapicals were billed. The Panel was satisfied that the large number of instances where this happened precludes this from being explained as "innocent mistakes". These "mistakes" appears to have occurred regardless of which hygienist or front office staff was working.

Dr. Solis either knew or ought to have known that these incorrect claims were being submitted under his name. At a minimum, Dr. Solis failed to exercise reasonable care to prevent these false claims from being submitted at all.

#### Allegation 4: Charging Excessive or Unreasonable Fees

The question the Panel dealt with in this allegation was whether the fee charged was excessive or unreasonable for the service provided. It did not consider whether the account was false or misleading.

S■■■■ W1 and S■■■■ W2 were both charged for complete examinations when only recall examinations were performed. Although Dr. Solis might not have been the attending dentist to

S██████ W.2, he is responsible for the billing accuracy because it was submitted in his name. A complete examination is much more expensive than a recall exam (Exhibit 4, Vol. 7, Tab 60A, p. 4310). The fees charged for these recall exams were therefore excessive and unreasonable.

Charges for the administration of local anesthetic when scaling was performed were also clearly excessive and unreasonable. The Ontario Dental Association has made it clear to the profession that a dentist cannot charge for this service.

#### Allegation 6: Failure to Collect Co-Pays

Dr. Solis has admitted that he failed to collect co-payments or deductibles from some patients. In no instance did Dr. Solis suggest that he obtained the insurer's written consent not to collect the co-payment or deductible. As a professional and member of this College, Dr. Solis knew or ought to have known that he had to make efforts to collect co-payments from his patients or at a minimum advise insurers of the circumstances in advance. Having failed to do so, the Member committed professional misconduct.

#### Allegation 7: Failure to Provide Records to the College

The Panel finds the Member engaged in conduct or performed an act or acts that, having regard to all circumstances, would reasonably be regarded by members of the profession as disgraceful, dishonourable, unprofessional or unethical.

This allegation is based on Dr. Solis's failure to provide the College complete records for fourteen patients, those records were requested by the College. Dr. Solis has admitted he failed to provide complete patient records as requested.

Discipline Panels of this College and other Colleges under the *RHPA* have concluded that a failure to respond to the College's requests, to provide records requested by the College, or to maintain records as requested by the College, constitutes disgraceful, dishonourable or unprofessional conduct; *RCDSO v. McGregor* January 29, 2018; *RCDSO v. Fletcher* (2017); *RCDSO v. Prager* (2015).

#### ***Summary***

The panel understands that with regard to many of these allegations, Dr. Solis takes the position that he delegated much of the financial matters to his staff and so he is not responsible for any errors in reporting to insurers. The panel does not accept this argument.

Dr. Solis is the sole owner of the Clinic and as such is ultimately responsible for the conduct of his staff. Even if the Member was not aware of all of the billing irregularities, he ought to have taken greater care to ensure that his front staff were billing appropriately. This was a serious dereliction of duty by the Member. He should not have given up all control over the management of his office to staff.

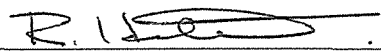
In any event, given the serious deficiencies in the records reviewed, the panel finds it difficult to accept that Dr. Solis had no idea about the billing errors, missing x-rays are other deficiencies in the records. He either directed his staff or at least knew that treatments not performed had been billed or billed incorrectly.


As the Clinic's owner, Dr. Solis was the primary beneficiary of the billing discrepancies, which appear to have persisted for a number of years and during a number of staff changes at the Clinic.

Further, the panel could not accept that the number of missing records, including x-rays which had been billed was the result of innocent misfiling. It appears that the Member directed his Clinic staff to bill for x-rays not performed or to bill for x-rays in order to maximize his recovery from his patients' insurers.

Dr. Solis orchestrated or at the very least allowed his Clinic to be run in a manner to mislead insurance companies for his ultimate benefit.

I, Richard Hunter, sign these Reasons for Decision on Motion as Chairperson of this Discipline Panel.

  
\_\_\_\_\_  
Chairperson

  
\_\_\_\_\_  
Date

## **SCHEDULE "A"**

H150017

**IN THE MATTER OF** a Hearing of a panel of the Discipline Committee of the Royal College of Dental Surgeons of Ontario held pursuant to the provisions of the Health Professions Procedural Code which is Schedule 2 to the *Regulated Health Professions Act, 1991*, Statutes of Ontario, 1991, Chapter 18 (the "*Code*") respecting one **DR. RICARDO SOLIS**, of the City of Innisfil, in the Province of Ontario;

**AND IN THE MATTER OF** the *Dentistry Act* and Ontario Regulation 853, Regulations of Ontario, 1993, as amended (the "*Dentistry Act Regulation*").

**AND IN THE MATTER OF** the *Statutory Powers Procedure Act*, Revised Statutes of Ontario, 1990, Chapter S.22, as amended; 1993, Chapter 27; 1994, Chapter 27.

TO: **DR. RICARDO SOLIS**  
**2089 THOMPSON ST**  
**INNISFIL ON L9S 1T1**

## **NOTICE OF HEARING**

**TAKE NOTICE THAT IT IS ALLEGED THAT:**

1. You committed an act or acts of professional misconduct as provided by s.51(1)(c) of the *Code*, in that, you contravened a standard of practice or failed to maintain the standards of practice of the profession relative to one or more of the following patients during the year and/or one or more of the years specified opposite that

patient's name, contrary to paragraph 1 of Section 2 of the Dentistry Act Regulation.

<u>Patients</u>	<u>Year(s)</u>
A [REDACTED], B [REDACTED]	2011, 2012
B [REDACTED], L [REDACTED]	2013, 2014
B [REDACTED], T [REDACTED] 1	2012, 2013
B [REDACTED], T [REDACTED] 2	2011, 2012
B [REDACTED], C [REDACTED]	2009, 2010, 2012, 2013, 2014
C [REDACTED], S [REDACTED] 1	2013, 2014
C [REDACTED], S [REDACTED] 2	2011, 2013, 2014
C [REDACTED], B [REDACTED]	2011, 2012, 2013
C [REDACTED], F [REDACTED]	2012, 2013
G [REDACTED], B [REDACTED]	2011, 2012, 2013
G [REDACTED], L [REDACTED]	2011
I [REDACTED], L [REDACTED]	2012
I [REDACTED], K [REDACTED]	2011, 2012, 2013,
I [REDACTED], S [REDACTED]	2007
L [REDACTED], M [REDACTED]	2010, 2011, 2012, 2013, 2014
M [REDACTED], D [REDACTED]	2011, 2012, 2013
N [REDACTED], S [REDACTED]	2010, 2011, 2012, 2013
S [REDACTED], C [REDACTED] 3	2011, 2012, 2013
S [REDACTED], B [REDACTED]	2009, 2010, 2011, 2013
S [REDACTED], C [REDACTED] 1	2009, 2013
S [REDACTED], A [REDACTED]	2013
T [REDACTED], J [REDACTED]	2013
T [REDACTED], G [REDACTED]	2013
T [REDACTED], R [REDACTED]	2013
Y [REDACTED], G [REDACTED]	2010, 2011
Y [REDACTED], N [REDACTED]	2012, 2013

Particulars:

- You exposed your patients to unnecessary ionizing radiation by taking x-rays too frequently, without justification (B [REDACTED] A [REDACTED], L [REDACTED] B [REDACTED], T [REDACTED] B [REDACTED] 1 T [REDACTED] B [REDACTED] 2 C [REDACTED] B [REDACTED], S [REDACTED] C [REDACTED] 1 S [REDACTED] C [REDACTED] 2 B [REDACTED] C [REDACTED], F [REDACTED] C [REDACTED], B [REDACTED] G [REDACTED], L [REDACTED] G [REDACTED], L [REDACTED] I [REDACTED], K [REDACTED] I [REDACTED], M [REDACTED] L [REDACTED], D [REDACTED] M [REDACTED], S [REDACTED] N [REDACTED], C [REDACTED] S [REDACTED] 3 B [REDACTED] S [REDACTED], C [REDACTED] S [REDACTED] 1 J [REDACTED] T [REDACTED], G [REDACTED] T [REDACTED], R [REDACTED] T [REDACTED], G [REDACTED] Y [REDACTED] and N [REDACTED] Y [REDACTED]).

- You took an x-ray image of a patient's healing fractured wrist, which was not within your scope of practice as a dentist (S [REDACTED] I [REDACTED]).
2. You committed an act or acts of professional misconduct as provided by s.51(1)(c) of the *Code*, in that, you recommended and/or provided an unnecessary dental service relative to one or more of the following patients during the year and/or one or more of the years specified opposite that patient's name, contrary to paragraph 6 of Section 2 of the Dentistry Act Regulation.

<u>Patients</u>	<u>Year(s)</u>
A [REDACTED], B [REDACTED]	2011, 2012
B [REDACTED], L [REDACTED]	2013, 2014
B [REDACTED], T [REDACTED] <sup>1</sup>	2012, 2013
B [REDACTED], T [REDACTED] <sup>2</sup>	2011, 2012
B [REDACTED], C [REDACTED]	2009, 2010, 2012, 2013, 2014
C [REDACTED], S [REDACTED] <sup>1</sup>	2013, 2014
C [REDACTED], S [REDACTED] <sup>2</sup>	2011, 2013, 2014
C [REDACTED], B [REDACTED]	2011, 2012, 2013
C [REDACTED], F [REDACTED]	2012, 2013
G [REDACTED], B [REDACTED]	2011, 2012, 2013
G [REDACTED], L [REDACTED]	2011
I [REDACTED], L [REDACTED]	2012
I [REDACTED], K [REDACTED]	2011, 2012, 2013,
I [REDACTED], S [REDACTED]	2007
L [REDACTED], M [REDACTED]	2010, 2011, 2012, 2013, 2014
M [REDACTED], D [REDACTED]	2011, 2012, 2013
N [REDACTED], S [REDACTED]	2010, 2011, 2012, 2013
S [REDACTED], C [REDACTED] <sup>3</sup>	2011, 2012, 2013
S [REDACTED], B [REDACTED]	2009, 2010, 2011, 2013
S [REDACTED], C [REDACTED] <sup>1</sup>	2009, 2013
S [REDACTED], A [REDACTED]	2013
T [REDACTED], J [REDACTED]	2013
T [REDACTED], G [REDACTED]	2013
T [REDACTED], R [REDACTED]	2013
Y [REDACTED], G [REDACTED]	2010, 2011
Y [REDACTED], N [REDACTED]	2012, 2013

Particulars:

- You exposed your patients to unnecessary ionizing radiation by taking x-rays too frequently, without justification (B [REDACTED] A [REDACTED], L [REDACTED])

B [REDACTED], T [REDACTED] B [REDACTED],<sup>1</sup>T [REDACTED] B [REDACTED],<sup>2</sup>C [REDACTED] B [REDACTED], S [REDACTED]  
 C [REDACTED],<sup>1</sup>S [REDACTED] C [REDACTED],<sup>2</sup>B [REDACTED] C [REDACTED], F [REDACTED] C [REDACTED], B [REDACTED] G [REDACTED],  
 L [REDACTED] G [REDACTED], L [REDACTED] I [REDACTED], K [REDACTED] I [REDACTED], M [REDACTED] L [REDACTED], D [REDACTED]  
 M [REDACTED], S [REDACTED] N [REDACTED], C [REDACTED] S [REDACTED], B [REDACTED] S [REDACTED],  
 C [REDACTED] S [REDACTED], J [REDACTED] T [REDACTED], G [REDACTED] T [REDACTED], R [REDACTED] T [REDACTED], G [REDACTED] Y [REDACTED]  
 and N [REDACTED] Y [REDACTED]).

- You took an x-ray image of a patient's healing fractured wrist, which was not within your scope of practice as a dentist (S [REDACTED] I [REDACTED]).

3. You committed an act or acts of professional misconduct as provided by s.51(1)(c) of the *Code*, in that you, signed or issued a certificate, report or similar document that you knew or ought to have known contained a false, misleading or improper statement relative to one or more of the following patients during the year and/or one or more of the years specified opposite that patient's name, contrary to paragraph 28 of Section 2 of the Dentistry Act Regulation.

<u>Patients</u>	<u>Year(s)</u>
A [REDACTED], B [REDACTED]	2010, 2011, 2012
B [REDACTED], T [REDACTED] <sup>1</sup>	2012
B [REDACTED], A [REDACTED]	2009, 2011
B [REDACTED], T [REDACTED] <sup>3</sup>	2009, 2011
B [REDACTED], T [REDACTED] <sup>2</sup>	2010, 2011, 2012
B [REDACTED], C [REDACTED]	2009, 2012, 2013, 2014
C [REDACTED], D [REDACTED]	2009, 2011, 2012
C [REDACTED], S [REDACTED] <sup>1</sup>	2010, 2011, 2012
C [REDACTED], S [REDACTED] <sup>2</sup>	2011, 2012, 2013
C [REDACTED], L [REDACTED]	2008
C [REDACTED], B [REDACTED]	2008, 2011, 2013, 2014
C [REDACTED], W [REDACTED]	2010, 2013
C [REDACTED], F [REDACTED]	2011, 2012
F [REDACTED], B [REDACTED]	2012
F [REDACTED], C [REDACTED]	2012
G [REDACTED], K [REDACTED]	2012
G [REDACTED], N [REDACTED]	2008, 2010
G [REDACTED], B [REDACTED]	2011, 2012
G [REDACTED], L [REDACTED]	2009, 2011, 2012
I [REDACTED], L [REDACTED]	2011, 2012
I [REDACTED], J [REDACTED]	2007, 2008
I [REDACTED], K [REDACTED]	2007, 2008, 2009, 2011, 2012, 2013
I [REDACTED], S [REDACTED]	2007, 2008

I [REDACTED], T [REDACTED]	2013
J [REDACTED], R [REDACTED]	2008, 2012
J [REDACTED], J [REDACTED]	2012
K [REDACTED], M [REDACTED]	2010
K [REDACTED], A [REDACTED]	2008
L [REDACTED], L [REDACTED]	2012
L [REDACTED], M [REDACTED]	2011, 2013
L [REDACTED], G [REDACTED]	2011, 2012
L [REDACTED], K [REDACTED]	2011
M [REDACTED], P [REDACTED]	2010
M [REDACTED], T [REDACTED]	2012
M [REDACTED], D [REDACTED]	2012, 2013
N [REDACTED], S [REDACTED]	2011, 2012
O [REDACTED], R [REDACTED]	2011
P [REDACTED], A [REDACTED]	2010
P [REDACTED], D [REDACTED]	2010
P [REDACTED], G [REDACTED]	2010
P [REDACTED], S [REDACTED]	2008
R [REDACTED], C [REDACTED]	2008
R [REDACTED], V [REDACTED]	2008
S [REDACTED], C [REDACTED] 2	2012
S [REDACTED], T [REDACTED]	2012
S [REDACTED], B [REDACTED]	2011, 2012
S [REDACTED], C [REDACTED] 1	2012
S [REDACTED], S [REDACTED]	2010, 2011
S [REDACTED], C [REDACTED] 3	2011, 2013
S [REDACTED], A [REDACTED]	2012, 2013
T [REDACTED], J [REDACTED]	2011, 2013
T [REDACTED], P [REDACTED]	2012, 2013
T [REDACTED], G [REDACTED]	2012
T [REDACTED], D [REDACTED]	2008
T [REDACTED], R [REDACTED]	2009, 2012
W [REDACTED], B [REDACTED]	2007
W [REDACTED], J [REDACTED]	2009, 2010, 2011
W [REDACTED], S [REDACTED] 1	2008, 2010, 2011
W [REDACTED], S [REDACTED] 2	2007, 2008, 2010, 2011, 2012, 2013
W [REDACTED], J [REDACTED]	2010
Y [REDACTED], G [REDACTED]	2011
Z [REDACTED], G [REDACTED]	2012, 2013



Particulars:

- You billed or submitted claims for dental services provided to one patient under the name of another patient as follows:
  - You provided dental services for L [REDACTED] G [REDACTED] but you submitted a claim or claims for those services under the name of her husband, B [REDACTED] G [REDACTED].
  - You provided dental services for S [REDACTED] C [REDACTED] but you submitted a claim or claims for those services under the name of his wife, S [REDACTED] C [REDACTED].<sup>2</sup>
  - You provided dental services for S [REDACTED] C [REDACTED] but you submitted a claim or claims for those services under the name of S [REDACTED] C [REDACTED]'s son, D [REDACTED] M [REDACTED].
  - You provided dental services to T [REDACTED] I [REDACTED] but you submitted claims for those services under the name of her son, J [REDACTED] I [REDACTED].
  - You provided dental services to J [REDACTED] I [REDACTED] but you submitted claims for those services under the name of K [REDACTED] I [REDACTED].
- You billed or submitted claims for dental services that were not provided in the following cases:
  - You submitted claims for examinations that were not provided (T [REDACTED] B [REDACTED],<sup>1</sup>T [REDACTED] B [REDACTED],<sup>2</sup>C [REDACTED] B [REDACTED], D [REDACTED] C [REDACTED], B [REDACTED] C [REDACTED], W [REDACTED] C [REDACTED], B [REDACTED] F [REDACTED], K [REDACTED] G [REDACTED], B [REDACTED] G [REDACTED], L [REDACTED] G [REDACTED], K [REDACTED] I [REDACTED], M [REDACTED] L [REDACTED], V [REDACTED] R [REDACTED], B [REDACTED] S [REDACTED], C [REDACTED] S [REDACTED],<sup>1</sup>S [REDACTED] S [REDACTED], A [REDACTED] S [REDACTED], J [REDACTED] T [REDACTED], R [REDACTED] T [REDACTED], J [REDACTED] W [REDACTED], S [REDACTED] W [REDACTED],<sup>1</sup>S [REDACTED] W [REDACTED]<sup>2</sup> and G [REDACTED] Y [REDACTED]).
  - You submitted claims for a periodontal re-evaluation, recall examination, oral hygiene instruction, x-rays, scaling, polishing, fluoride treatments and de-sensitizations that were not provided (D [REDACTED] M [REDACTED]).
  - You submitted claims for irrigations, periodontal re-evaluations, recall examinations, oral hygiene instruction, x-rays, scaling, polishing, fluoride treatments, desensitization and a periodontal appliance that were not provided (S [REDACTED] C [REDACTED]).<sup>1</sup>
  - You submitted claims for periodontal re-evaluations, recall examinations, oral hygiene instruction, x-rays, scaling, polishing, fluoride treatment, desensitization, smoothing a traumatized tooth and a specific examination that were not provided (S [REDACTED] C [REDACTED]).<sup>2</sup>
  - You submitted claims for gingivectomies that were not performed (A [REDACTED] B [REDACTED], T [REDACTED] B [REDACTED],<sup>3</sup>G [REDACTED] L [REDACTED] and K [REDACTED] L [REDACTED]).
  - You submitted claims for x-rays that were not taken (B [REDACTED] A [REDACTED], A [REDACTED] B [REDACTED], T [REDACTED] B [REDACTED],<sup>3</sup>T [REDACTED] B [REDACTED],<sup>2</sup>D [REDACTED] C [REDACTED], B [REDACTED] C [REDACTED], B [REDACTED] G [REDACTED], L [REDACTED] G [REDACTED], T [REDACTED] I [REDACTED], J [REDACTED] J [REDACTED], M [REDACTED] K [REDACTED], G [REDACTED] L [REDACTED], K [REDACTED] L [REDACTED], S [REDACTED] N [REDACTED], D [REDACTED] P [REDACTED],

- C [REDACTED] S [REDACTED],<sup>3</sup>B [REDACTED] S [REDACTED], S [REDACTED] S [REDACTED], P [REDACTED] T [REDACTED], G [REDACTED] T [REDACTED] and R [REDACTED] T [REDACTED]).
- You submitted claims for an emergency examination and a denture that was not provided (S [REDACTED] I [REDACTED]).
  - You submitted claims for x-rays, hygiene treatment, fluoride treatments and a cast/model that were not provided (K [REDACTED] I [REDACTED]).
  - You submitted claims for scaling that was not provided (D [REDACTED] C [REDACTED], L [REDACTED] G [REDACTED] and L [REDACTED] I [REDACTED]).
  - You submitted claims for de-sensitization that was not provided (B [REDACTED] C [REDACTED] and R [REDACTED] J [REDACTED]).
  - You submitted claims for a pulpectomy, scaling and x-rays, that were not provided (F [REDACTED] C [REDACTED]).
  - You submitted a claim for fluoride treatment that was not provided (L [REDACTED] L [REDACTED]).
  - You submitted a claim for a fluoride treatment and de-sensitization that were not provided. (G [REDACTED] Y [REDACTED]).
  - You submitted a claim for oral hygiene instruction that was not provided (B [REDACTED] C [REDACTED]).
  - You billed or submitted false or misleading claims in the following cases:
    - You submitted claims for complete examinations when you performed recall examinations (S [REDACTED] W [REDACTED] and S [REDACTED] W [REDACTED])<sup>2</sup>
    - You submitted claims for specific examinations when you performed complete examinations (L [REDACTED] I [REDACTED] and B [REDACTED] W [REDACTED]).
    - You submitted claims for administering local anaesthetic when such claims were not justified as local anaesthetic is not a separate billable procedure when provided in conjunction with scaling or restorative treatment (T [REDACTED] B [REDACTED],<sup>1</sup>L [REDACTED] C [REDACTED], C [REDACTED] F [REDACTED], N [REDACTED] G [REDACTED], R [REDACTED] J [REDACTED], A [REDACTED] K [REDACTED], P [REDACTED] M [REDACTED], T [REDACTED] M [REDACTED], R [REDACTED] O [REDACTED], A [REDACTED] P [REDACTED], D [REDACTED] P [REDACTED], G [REDACTED] P [REDACTED], S [REDACTED] P [REDACTED], C [REDACTED] R [REDACTED], V [REDACTED] R [REDACTED], D [REDACTED] T [REDACTED], S [REDACTED] W [REDACTED],<sup>1</sup>J [REDACTED] W [REDACTED] and G [REDACTED] Z [REDACTED]).
    - You submitted claims for a surgical flap with ostectomy (code 42411) and tooth coloured restorations (codes 23114) when you provided veneers for four teeth (S [REDACTED] C [REDACTED]).<sup>1</sup>
    - You submitted a claim for a gingivectomy when you provided bleaching/whitening (S [REDACTED] C [REDACTED]).<sup>1</sup>
    - You submitted a claim for a gingivectomy when you provided scaling (S [REDACTED] C [REDACTED]).<sup>2</sup>
    - You submitted a claim for scaling when you provided bleaching/whitening (R [REDACTED] J [REDACTED]).

- You submitted claims for scaling, desensitization, a complete examination, x-rays, fluoride treatment and oral hygiene instruction when you provided bleaching/whitening (C [REDACTED] S [REDACTED]).<sup>2</sup>
  - You submitted claims for an emergency examination, desensitization, a recall examination, x-rays, scaling, polishing and oral hygiene instruction when you provided bleaching/whitening (T [REDACTED] S [REDACTED]).
  - You submitted claims with incorrect dates of service for various dental procedures you performed (B [REDACTED] A [REDACTED], T [REDACTED] B [REDACTED],<sup>2</sup>C [REDACTED] B [REDACTED], B [REDACTED] C [REDACTED], L [REDACTED] G [REDACTED], K [REDACTED] I [REDACTED], S [REDACTED] I [REDACTED], T [REDACTED] M [REDACTED] and D [REDACTED] P [REDACTED]).
  - You submitted claims for periapical x-rays when bite-wing x-rays were taken (C [REDACTED] B [REDACTED], D [REDACTED] C [REDACTED], S [REDACTED] C [REDACTED],<sup>2</sup>F [REDACTED] C [REDACTED], B [REDACTED] F [REDACTED], B [REDACTED] G [REDACTED], L [REDACTED] I [REDACTED], K [REDACTED] I [REDACTED], M [REDACTED] L [REDACTED], D [REDACTED] M [REDACTED], S [REDACTED] N [REDACTED], D [REDACTED] P [REDACTED], C [REDACTED] S [REDACTED],<sup>3</sup>C [REDACTED] S [REDACTED],<sup>1</sup>A [REDACTED] S [REDACTED], J [REDACTED] T [REDACTED] and P [REDACTED] T [REDACTED]).
  - You submitted claims for bite-wing x-rays when peri-apical x-rays were taken (W [REDACTED] C [REDACTED] and S [REDACTED] I [REDACTED]).
  - You submitted claims for periapical x-rays when panoramic x-rays were taken (L [REDACTED] G [REDACTED] and C [REDACTED] S [REDACTED]).<sup>1</sup>
4. You committed an act or acts of professional misconduct as provided by s.51(1)(c) of the *Code*, in that, you charged a fee that was excessive or unreasonable in relation to the service performed relative to one or more of the following patients during the year and/or one or more of the years specified opposite that patient's name, contrary to paragraph 31 of Section 2 of the Dentistry Act Regulation.

<u>Patients</u>	<u>Year(s)</u>
B [REDACTED], T [REDACTED] <sup>1</sup>	2011, 2012
C [REDACTED], S [REDACTED] <sup>1</sup>	2010
C [REDACTED], L [REDACTED]	2008
F [REDACTED], C [REDACTED]	2012
G [REDACTED], N [REDACTED]	2008, 2010
I [REDACTED], K [REDACTED]	2012
J [REDACTED], R [REDACTED]	2008
K [REDACTED], A [REDACTED]	2008
M [REDACTED], P [REDACTED]	2010
M [REDACTED], T [REDACTED]	2012
O [REDACTED], R [REDACTED]	2011
P [REDACTED], A [REDACTED]	2010

P [REDACTED], D [REDACTED]	2010
P [REDACTED], G [REDACTED]	2010
P [REDACTED], S [REDACTED]	2008
R [REDACTED], C [REDACTED]	2008
R [REDACTED], V [REDACTED]	2008
T [REDACTED], D [REDACTED]	2008
W [REDACTED], S [REDACTED] 1	2008, 2010
W [REDACTED], S [REDACTED] 2	2013
W [REDACTED], J [REDACTED]	2010
Z [REDACTED], G [REDACTED]	2012

Particulars:

- You submitted claims for complete examinations when you performed recall examinations (K [REDACTED] I [REDACTED], S [REDACTED] W [REDACTED]<sup>1</sup> and S [REDACTED] W [REDACTED]).<sup>2</sup>
  - You submitted claims for administering local anaesthetic with scaling and restorative treatment when such claims were not justified as local anaesthetic is not a separate billable procedure when provided in conjunction with those services (T [REDACTED] B [REDACTED],<sup>1</sup> L [REDACTED] C [REDACTED], C [REDACTED] F [REDACTED], N [REDACTED] G [REDACTED], R [REDACTED] J [REDACTED], A [REDACTED] K [REDACTED], P [REDACTED] M [REDACTED], T [REDACTED] M [REDACTED], R [REDACTED] O [REDACTED], A [REDACTED] P [REDACTED], D [REDACTED] P [REDACTED], G [REDACTED] P [REDACTED], S [REDACTED] P [REDACTED], C [REDACTED] R [REDACTED], V [REDACTED] R [REDACTED], D [REDACTED] T [REDACTED], S [REDACTED] W [REDACTED],<sup>1</sup> J [REDACTED] W [REDACTED] and G [REDACTED] Z [REDACTED]).
  - You submitted a claim for a complete examination when no charting was performed (S [REDACTED] C [REDACTED]).<sup>1</sup>
  - You submitted claims for a total of \$1,900.00 for orthodontic treatment for K [REDACTED] I [REDACTED] but did not record any progress/treatment notes regarding orthodontic treatment, and the orthodontic treatment consisted only of a Hawley appliance.
  - You submitted a claim for an intra-operative endodontic periapical x-ray when such x-rays are included in the endodontic fee (T [REDACTED] B [REDACTED]).<sup>1</sup>
5. You committed an act or acts of professional misconduct as provided by s.51(1)(c) of the *Code*, in that, you submitted an account or charge for dental services that you knew or ought to have known was false or misleading relative to one or more of the following patients during the year and/or one or more of the years specified opposite that patient's name, contrary to paragraph 33 of Section 2 of the Dentistry Act Regulation.

<u>Patients</u>	<u>Year(s)</u>
A [REDACTED], B [REDACTED]	2010, 2011, 2012

B [REDACTED], T [REDACTED] 1	2012
B [REDACTED], A [REDACTED]	2009, 2011
B [REDACTED], T [REDACTED] 3	2009, 2011
B [REDACTED], T [REDACTED] 2	2010, 2011, 2012
B [REDACTED], C [REDACTED]	2009, 2012, 2013, 2014
C [REDACTED], D [REDACTED]	2009, 2011, 2012
C [REDACTED], S [REDACTED] 1	2010, 2011, 2012
C [REDACTED], S [REDACTED] 2	2011, 2012, 2013
C [REDACTED], L [REDACTED]	2008
C [REDACTED], B [REDACTED]	2008, 2011, 2013, 2014
C [REDACTED], W [REDACTED]	2010, 2013
C [REDACTED], F [REDACTED]	2011, 2012
F [REDACTED], B [REDACTED]	2012
F [REDACTED], C [REDACTED]	2012
G [REDACTED], K [REDACTED]	2012
G [REDACTED], N [REDACTED]	2008, 2010
G [REDACTED], B [REDACTED]	2011, 2012
G [REDACTED], L [REDACTED]	2009, 2011, 2012
I [REDACTED], L [REDACTED]	2011, 2012
I [REDACTED], J [REDACTED]	2007, 2008
I [REDACTED], K [REDACTED]	2007, 2008, 2009, 2011, 2012, 2013
I [REDACTED], S [REDACTED]	2007, 2008
I [REDACTED], T [REDACTED]	2013
J [REDACTED], R [REDACTED]	2008, 2012
J [REDACTED], J [REDACTED]	2012
K [REDACTED], M [REDACTED]	2010
K [REDACTED], A [REDACTED]	2008
L [REDACTED], L [REDACTED]	2012
L [REDACTED], M [REDACTED]	2011, 2013
L [REDACTED], G [REDACTED]	2011, 2012
L [REDACTED], K [REDACTED]	2011
M [REDACTED], P [REDACTED]	2010
M [REDACTED], T [REDACTED]	2012
M [REDACTED], D [REDACTED]	2012, 2013
N [REDACTED], S [REDACTED]	2011, 2012
O [REDACTED], R [REDACTED]	2011
P [REDACTED], A [REDACTED]	2010
P [REDACTED], D [REDACTED]	2010
P [REDACTED], G [REDACTED]	2010
P [REDACTED], S [REDACTED]	2008

R [REDACTED], C [REDACTED]	2008
R [REDACTED], V [REDACTED]	2008
S [REDACTED], C [REDACTED] <sup>2</sup>	2012
S [REDACTED], T [REDACTED]	2012
S [REDACTED], B [REDACTED]	2011, 2012
S [REDACTED], C [REDACTED] <sup>1</sup>	2012
S [REDACTED], S [REDACTED]	2010, 2011
S [REDACTED], C [REDACTED] <sup>3</sup>	2011, 2013
S [REDACTED], A [REDACTED]	2012, 2013
T [REDACTED], J [REDACTED]	2011, 2013
T [REDACTED], P [REDACTED]	2012, 2013
T [REDACTED], G [REDACTED]	2012
T [REDACTED], D [REDACTED]	2008
T [REDACTED], R [REDACTED]	2009, 2012
W [REDACTED], B [REDACTED]	2007
W [REDACTED], J [REDACTED]	2009, 2010, 2011
W [REDACTED], S [REDACTED] <sup>1</sup>	2008, 2010, 2011
W [REDACTED], S [REDACTED] <sup>2</sup>	2007, 2008, 2010, 2011, 2012, 2013
W [REDACTED], J [REDACTED]	2010
Y [REDACTED], G [REDACTED]	2011
Z [REDACTED], G [REDACTED]	2012, 2013

Particulars:

- You billed or submitted claims for dental services provided to one patient under the name of another patient as follows:
  - You provided dental services for L [REDACTED] G [REDACTED] but you submitted a claim or claims for those services under the name of her husband, B [REDACTED] G [REDACTED].
  - You provided dental services for S [REDACTED] C [REDACTED]<sup>1</sup> but you submitted a claim or claims for those services under the name of his wife, S [REDACTED] C [REDACTED]<sup>2</sup>.
  - You provided dental services for S [REDACTED] C [REDACTED]<sup>1</sup> but you submitted a claim or claims for those services under the name of S [REDACTED] C [REDACTED]<sup>2</sup>'s son, D [REDACTED] M [REDACTED].
  - You provided dental services to T [REDACTED] I [REDACTED] but you submitted claims for those services under the name of her son, J [REDACTED] I [REDACTED].
  - You provided dental services to J [REDACTED] I [REDACTED] but you submitted claims for those services under the name of K [REDACTED] I [REDACTED].
- You billed or submitted claims for dental services that were not provided in the following cases:
  - You submitted claims for examinations that were not provided (T [REDACTED] B [REDACTED],<sup>1</sup> T [REDACTED] B [REDACTED],<sup>2</sup> C [REDACTED] B [REDACTED], D [REDACTED] C [REDACTED], B [REDACTED]

C [REDACTED], W [REDACTED] C [REDACTED], B [REDACTED] F [REDACTED], K [REDACTED] G [REDACTED], B [REDACTED] G [REDACTED], L [REDACTED] G [REDACTED], K [REDACTED] I [REDACTED], M [REDACTED] L [REDACTED], V [REDACTED] R [REDACTED], B [REDACTED] S [REDACTED], C [REDACTED] S [REDACTED],<sup>1</sup> S [REDACTED] S [REDACTED], A [REDACTED] S [REDACTED], J [REDACTED] T [REDACTED], R [REDACTED] T [REDACTED], J [REDACTED] W [REDACTED], S [REDACTED] W [REDACTED],<sup>1</sup> S [REDACTED] W [REDACTED]<sup>2</sup> and G [REDACTED] Y [REDACTED]).

- You submitted claims for a periodontal re-evaluation, a recall examination, oral hygiene instruction, x-rays, scaling, polishing, fluoride treatments and de-sensitizations that were not provided (D [REDACTED] M [REDACTED]).
- You submitted claims for irrigations, periodontal re-evaluations, recall examinations, oral hygiene instruction, x-rays, scaling, polishing, fluoride treatments, desensitization and a periodontal appliance that were not provided (S [REDACTED] C [REDACTED]).<sup>1</sup>
- You submitted claims for periodontal re-evaluations, recall examinations, oral hygiene instruction, x-rays, scaling, polishing, fluoride treatment, desensitization, smoothing a traumatized tooth and a specific examination that were not provided (S [REDACTED] C [REDACTED]).<sup>2</sup>
- You submitted claims for gingivectomies that were not performed (A [REDACTED] B [REDACTED], T [REDACTED] B [REDACTED],<sup>3</sup> G [REDACTED] L [REDACTED] and K [REDACTED] L [REDACTED]).
- You submitted claims for x-rays that were not taken (B [REDACTED] A [REDACTED], A [REDACTED] B [REDACTED], T [REDACTED] B [REDACTED],<sup>3</sup> T [REDACTED] B [REDACTED],<sup>2</sup> D [REDACTED] C [REDACTED], B [REDACTED] C [REDACTED], B [REDACTED] G [REDACTED], L [REDACTED] G [REDACTED], T [REDACTED] I [REDACTED], J [REDACTED] J [REDACTED], M [REDACTED] K [REDACTED], G [REDACTED] L [REDACTED], K [REDACTED] L [REDACTED], S [REDACTED] N [REDACTED], D [REDACTED] P [REDACTED], C [REDACTED] S [REDACTED],<sup>3</sup> B [REDACTED] S [REDACTED], S [REDACTED] S [REDACTED], P [REDACTED] T [REDACTED], G [REDACTED] T [REDACTED] and R [REDACTED] T [REDACTED]).
- You submitted claims for an emergency examination and a denture that was not provided (S [REDACTED] I [REDACTED]).
- You submitted claims for x-rays, hygiene treatment, fluoride treatments and a cast/model that were not provided (K [REDACTED] I [REDACTED]).
- You submitted claims for scaling that was not provided (D [REDACTED] C [REDACTED], L [REDACTED] G [REDACTED] and L [REDACTED] I [REDACTED]).
- You submitted claims for de-sensitization that was not provided (B [REDACTED] C [REDACTED] and R [REDACTED] J [REDACTED]).
- You submitted claims for a pulpectomy, scaling and x-rays, that were not provided (F [REDACTED] C [REDACTED]).
- You submitted a claim for fluoride treatment that was not provided (L [REDACTED] L [REDACTED]).
- You submitted a claim for a fluoride treatment and de-sensitization that were not provided. (G [REDACTED] Y [REDACTED]).
- You submitted a claim for oral hygiene instruction that was not provided (B [REDACTED] C [REDACTED]).

- You billed or submitted false or misleading claims in the following cases:
  - You submitted claims for complete examinations when you performed recall examinations (S████ W████<sup>1</sup> and S████ W████).<sup>2</sup>
  - You submitted claims for specific examinations when you performed complete examinations (L████ I████ and B████ W████).
  - You submitted claims for administering local anaesthetic when such claims were not justified as local anaesthetic is not a separate billable procedure when provided in conjunction with scaling or restorative treatment (T████ B████,<sup>1</sup> L████ C████, C████ F████, N████ G████, R████ J████, A████ K████, P████ M████, T████ M████, R████ O████, A████ P████, D████ P████, G████ P████, S████ P████, C████ R████, V████ R████, D████ T████, S████ W████,<sup>1</sup> J████ W████ and G████ Z████).
  - You submitted claims for a surgical flap with ostectomy (code 42411) and tooth coloured restorations (codes 23114) when you provided veneers for four teeth (S████ C████).<sup>1</sup>
  - You submitted a claim for a gingivectomy when you provided bleaching/whitening (S████ C████a).<sup>1</sup>
  - You submitted a claim for a gingivectomy when you provided scaling (S████ C████).<sup>2</sup>
  - You submitted a claim for scaling when you provided bleaching/whitening (R████ J████).
  - You submitted claims for scaling, desensitization, a complete examination, x-rays, fluoride treatment and oral hygiene instruction when you provided bleaching/whitening (C████ S████).<sup>2</sup>
  - You submitted claims for an emergency examination, desensitization, a recall examination, x-rays, scaling, polishing and oral hygiene instruction when you provided bleaching/whitening (T████ S████).
  - You submitted claims with incorrect dates of service for various dental procedures you performed (B████ A████, T████ B████,<sup>2</sup> C████ B████, B████ C████, L████ G████, K████ I████, S████ I████, T████ M████ and D████ P████).
  - You submitted claims for periapical x-rays when bite-wing x-rays were taken (C████ B████, D████ C████, S████ C████,<sup>2</sup> F████ C████a, B████ F████, B████ G████, L████ I████, K████ I████, M████ L████, D████ M████, S████ N████, D████ P████, C████ S████,<sup>3</sup> C████ S████,<sup>1</sup> A████ S████, J████ T████ and P████ T████).
  - You submitted claims for bite-wing x-rays when peri-apical x-rays were taken (W████ C████ and S████ I████).



- o You submitted claims for periapical x-rays when panoramic x-rays were taken (L [REDACTED] G [REDACTED] and C [REDACTED] S [REDACTED]).<sup>1</sup>

6. You committed an act or acts of professional misconduct as provided by s.51(1)(c) of the *Code*, in that, you accepted an amount in full payment of an account or charge, that was less than the full amount of the account or charge submitted by you to a third party payer, without making reasonable efforts to collect the balance from the patient, or to obtain the written consent of the third party payer, relative to one or more of the following patients during the year and/or one or more of the years specified opposite that patient's name, contrary to paragraph 34 of Section 2 of the Dentistry Act Regulation.

<u>Patients</u>	<u>Year(s)</u>
A [REDACTED], B [REDACTED]	2011, 2012
B [REDACTED], A [REDACTED]	2009
B [REDACTED], T [REDACTED] <sup>2</sup>	2011
I [REDACTED], K [REDACTED]	2011, 2013
J [REDACTED], J [REDACTED]	2013
S [REDACTED], B [REDACTED]	2010, 2011
T [REDACTED], R [REDACTED]	2008, 2009

Particulars:

- You failed to collect the co-payments and/or deductibles for dental services provided to the above-named patients.

7. You committed an act or acts of professional misconduct as provided by s.51(1)(c) of the *Code*, in that, you engaged in conduct or performed an act or acts that, having regard to all the circumstances, would reasonably be regarded by members as disgraceful, dishonourable, unprofessional or unethical relative to one or more of the following patients during the year and/or one or more of the years specified opposite that patient's name, contrary to paragraph 59 of Section 2 of the Dentistry Act Regulation.

<u>Patients</u>	<u>Year(s)</u>
B [REDACTED], A [REDACTED]	2007, 2008, 2009, 2010, 2011, 2012
B [REDACTED], T [REDACTED] <sup>3</sup>	2007, 2008, 2009, 2010, 2011, 2012
C [REDACTED], S [REDACTED] <sup>1</sup>	2012
C [REDACTED], L [REDACTED]	2007, 2008, 2009, 2010
I [REDACTED], J [REDACTED]	2007, 2008, 2009, 2010, 2011, 2012, 2013, 2014, 2015
I [REDACTED], K [REDACTED]	2007

I [REDACTED], T [REDACTED]	2007, 2008, 2009, 2010, 2011, 2012, 2013
K [REDACTED], M [REDACTED]	2008, 2009, 2010, 2011, 2012, 2013, 2014
K [REDACTED], A [REDACTED]	2007, 2008, 2009, 2010
L [REDACTED], G [REDACTED]	2008, 2009, 2010, 2011, 2012
L [REDACTED], K [REDACTED]	2008, 2009, 2010, 2011, 2012
M [REDACTED], P [REDACTED]	2010, 2011, 2012
R [REDACTED], C [REDACTED]	2008
S [REDACTED], S [REDACTED]	2007, 2008, 2009, 2010, 2011, 2012, 2013

Particulars:

- You failed to provide the College with the complete patient records for the following patients, whose records were requested by the College:

<u>Patient's Name</u>	<u>Records Not Provided</u>
A [REDACTED] B [REDACTED]	- paper-based records
T [REDACTED] B [REDACTED]	3- paper-based records
S [REDACTED] C [REDACTED]	1 - laboratory invoices
L [REDACTED] C [REDACTED]	- paper-based records and ledger
J [REDACTED] I [REDACTED]	- paper-based records
K [REDACTED] I [REDACTED]	- models
T [REDACTED] I [REDACTED]	- paper-based records
M [REDACTED] K [REDACTED]	- paper-based records
A [REDACTED] K [REDACTED]	- paper-based records and ledger
G [REDACTED] L [REDACTED]	- paper-based records
K [REDACTED] L [REDACTED]	- paper-based records
P [REDACTED] M [REDACTED]	- paper-based records and ledger
C [REDACTED] R [REDACTED]	- progress notes
S [REDACTED] S [REDACTED]	4 - paper-based records

Such further and other particulars will be provided from time to time, as they become known.

**AND TAKE NOTICE THAT** the said allegations respecting professional misconduct will be heard and determined by a panel of the Discipline Committee of the Royal College of Dental Surgeons of Ontario (the "Panel") on a date and time to be agreed upon by the parties, or on a date to be fixed by the Chair of the Discipline Committee, at the offices of the Royal College of Dental Surgeons of Ontario, 6 Crescent Road, Toronto, Ontario, M4W 1T1. You are required to appear in person or by a legal representative before the Panel with your witnesses, if any, at the time and place aforesaid.

ONCE A DATE IS FIXED, IF YOU DO NOT ATTEND ON THE FIXED HEARING DATE, THE PANEL MAY PROCEED IN YOUR ABSENCE AND YOU WILL NOT BE ENTITLED TO ANY FURTHER NOTICE OF THE PROCEEDINGS.

The *Code* provides that if the Panel finds that you have committed an act of professional misconduct, it may make an order doing any one or more of the following:

- (1) directing the Registrar to revoke your certificate of registration;
- (2) directing the Registrar to suspend your certificate of registration for a specified period of time;
- (3) directing the Registrar to impose specified terms, conditions and limitations on your certificate of registration for a specified or indefinite period of time;
- (4) requiring you to appear before the panel to be reprimanded;
- (5) requiring you to pay a fine of not more than \$35,000.00 to the Minister of Finance;

or any combination thereof.

Furthermore, the *Code* provides that if the Panel is of the opinion that the commencement of these proceedings is unwarranted, it may make an order requiring the College to pay all or part of your legal costs.

The *Code* also provides that in an appropriate case, the Panel may make an order requiring you, in the event the Panel finds you have committed an act or acts of professional misconduct or finds you to be incompetent, to pay all or part of the following costs and expenses:

1. the College's legal costs and expenses;
2. the College's costs and expenses incurred in investigating the matter; and
3. the College's costs and expenses incurred in conducting the hearing.

If you have not done so already, you are entitled to and are well advised to retain legal representation to assist you in this matter.

You are entitled to disclosure of the evidence in this matter in accordance with section 42(1) of the *Code*. You or your representative may contact the solicitor for the College, [REDACTED] in this matter at:

[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]

You, or your legal representative, should familiarize yourself with your disclosure obligations under law, including section 42.1 of the *Code*.

DATED at Toronto, this 18<sup>th</sup> day of November, 2015.



Royal College of Dental Surgeons of Ontario

**IN THE MATTER OF** a Hearing of a panel of the Discipline Committee of the Royal College of Dental Surgeons of Ontario ("College") held pursuant to the provisions of the Health Professions Procedural Code which is Schedule 2 to the *Regulated Health Professions Act, 1991*, Statutes of Ontario, 1991, Chapter 18 (the "Code"), respecting one **DR. RICARDO SOLIS**, of the City of Innisfil, in the Province of Ontario;

**AND IN THE MATTER OF** the *Dentistry Act* and Ontario Regulation 853, Regulations of Ontario, 1993, as amended (the "Dentistry Act Regulation").

**AND IN THE MATTER OF** the *Statutory Powers Procedure Act*, Revised Statutes of Ontario, 1990, Chapter S.22, as amended; 1993, Chapter 27; 1994, Chapter 27.

### **AGREED STATEMENT OF FACTS**

#### **I. AGREED FACTS RESPECTING RADIOGRAPHS (ALLEGATIONS 1 & 2)**

**1. B [REDACTED] A [REDACTED]**

- a. Dr. Solis was the attending dentist for B [REDACTED] A [REDACTED] on or about March 5, 2012.
- b. On or about March 5, 2012, two bite wing x-rays were taken of this patient.

**2. L [REDACTED] B [REDACTED]**

- a. Dr. Solis was the attending dentist for L [REDACTED] B [REDACTED] on or about:
  - i. March 25, 2013; and
  - ii. February 27, 2014.
- b. On or about March 25, 2013, two bite wing x-rays were taken of this patient.
- c. On or about February 27, 2014, two bite wings and two periapical x-rays were taken of this patient.

**3. T [REDACTED] B [REDACTED] 1**

- a. Dr. Solis was the attending dentist for T [REDACTED] B [REDACTED]<sup>1</sup> on or about March 14, 2012.
- b. Two bite wing x-rays and one periapical x-ray were taken for this patient on this date.
- c. All three x-rays are present and accounted for in the patient's file.

## 4. T [REDACTED] B [REDACTED] 2

- a. Dr. Solis was the attending dentist for T [REDACTED] B [REDACTED]<sup>2</sup> on or about March 5, 2012.
- b. On or about March 5, 2012, two bite wing x-rays were taken of this patient.

## 5. C [REDACTED] B [REDACTED]

- a. Dr. Solis was the attending dentist for C [REDACTED] B [REDACTED] on or about:
  - i. February 12, 2009;
  - ii. January 25, 2010;
  - iii. June 10, 2013; and
  - iv. January 28, 2014.
- b. Two bite wing x-rays were taken for C [REDACTED] B [REDACTED] on February 12, 2009.
- c. Four periapical x-rays were taken for C [REDACTED] B [REDACTED] on February 12, 2009.
- d. Two bite wing x-rays are in this patient's file for this date.
- e. On or about January 25, 2010, two bite wing x-rays were taken of this patient.
- f. On or about June 10, 2013 two bite wing x-rays and two periapical x-rays were taken of this patient.
- g. On or about January 28, 2014:
  - i. two periapical x-ray were taken for C [REDACTED] B [REDACTED];
  - ii. two bite wing x-rays were taken for C [REDACTED] B [REDACTED];
  - iii. polish, fluoride, and three units of scaling were provided to C [REDACTED] B [REDACTED].

## 6. S [REDACTED] C [REDACTED] 1

- a. Dr. Solis was the attending dentist for S [REDACTED] C [REDACTED]<sup>1</sup> on or about:
  - i. April 30, 2013; and
  - ii. May 7, 2014.
- b. On or about April 30, 2013, two bite wing x-rays, two periapical x-rays, and one orthopantomograph were taken of this patient.
- c. On or about November 6, 2013, two bite wing x-rays and two periapical x-rays were taken of this patient.
- d. On or about May 7, 2014, two bite wing x-rays and two periapical x-rays were taken of this patient.

## 7. S [REDACTED] C [REDACTED] 2

- a. Dr. Solis was the attending dentist for S [REDACTED] C [REDACTED]<sup>2</sup> on or about September 30, 2013.
- b. Two bite wing, two periapical and one panoramic x-ray were taken for S [REDACTED] C [REDACTED]<sup>2</sup> on or about September 30, 2013.

- c. There are two bite wing and two periapical x-rays in S [REDACTED] C [REDACTED]<sup>2</sup>'s file for September 30, 2013.

**8. B [REDACTED] G [REDACTED]**

- a. On or about May 14, 2012, four bite wing x-rays were taken of this patient.  
b. On or about May 16, 2013, two bite wing x-rays and two periapical x-rays were taken of this patient.

**9. K [REDACTED] [REDACTED]**

- a. Dr. Solis was the attending dentist for K [REDACTED] I [REDACTED] on or about March 7, 2013.  
b. On or about March 7, 2013, two bite wing x-rays were taken of this patient.

**10. M [REDACTED] L [REDACTED]**

- a. Dr. Solis was the attending dentist for M [REDACTED] L [REDACTED] on or about:  
i. October 20, 2010;  
ii. April 23, 2013;  
iii. June 10/19, 2013; and  
iv. February 11, 2014.  
b. Two bite wing x-rays were taken for M [REDACTED] L [REDACTED] on or about October 20, 2010.  
c. Two bite wing x-rays are present and accounted for in M [REDACTED] L [REDACTED]'s file for October 20, 2010.  
d. One periapical x-ray is in M [REDACTED] L [REDACTED]'s file for October 20, 2010.  
e. M [REDACTED] L [REDACTED] was not charged for this periapical x-ray.  
f. On or about April 23, 2013, two bite wing x-rays, two periapical x-rays, and one orthopantomograph were taken of this patient.  
g. The panoramic x-ray taken for M [REDACTED] L [REDACTED] on or about June 19, 2013, was unnecessary.  
h. On or about February 11, 2014, two bite wings and two periapical x-rays were taken of this patient.

**11. D [REDACTED] M [REDACTED]**

- a. Dr. Solis was the attending dentist for D [REDACTED] M [REDACTED] on or about November 8, 2012.  
b. On or about November 8, 2012, two bite wing x-rays were taken of this patient.

**12. S [REDACTED] M [REDACTED]**

- a. Dr. Solis was the attending dentist for S [REDACTED] M [REDACTED] on or about:
  - i. March 21, 2012.
- b. On or about March 28, 2011, two bite wing x-rays were taken of this patient.
- c. On or about March 21, 2012, two bite wing x-rays were taken of this patient.

**13. C [REDACTED] S [REDACTED]<sup>3</sup>**

- a. Dr. Solis was the attending dentist for C [REDACTED] S [REDACTED]<sup>3</sup> on or about:
  - i. February 7, 2012;
  - ii. September 5, 2012;
  - iii. March 6, 2013; and/or
  - iv. September 10, 2013.
- b. On or about February 7, 2012, two bite wing x-rays were taken of this patient.
- c. On or about September 5, 2012, two bite wing x-rays were taken for this patient.
- d. Both of the bite wing x-rays for September 5, 2012, are present in the patient's file.
- e. One periapical x-ray was taken for this patient on this date.
- f. On or about March 6, 2013, two bite wing x-rays and one orthopantomograph were taken of this patient.
- g. On or about September 10, 2013, two bite wing x-rays were taken for this patient.
- h. Two bite wing x-rays are in this patient's file for this date.
- i. One periapical x-ray is in this patient's file for this date.

**14. B [REDACTED] S [REDACTED]**

- a. Dr. Solis was the attending dentist for B [REDACTED] S [REDACTED] on or about:
  - i. April 29, 2013.
- b. On or about April 29, 2013, two bite wing x-rays were taken of this patient.

**15. A [REDACTED] S [REDACTED]**

- a. Dr. Solis was the attending dentist for A [REDACTED] S [REDACTED] on March 26, 2013.
- b. On or about March 26, 2013, four bite wing x-rays were taken of this patient.

**16. G [REDACTED] T [REDACTED]**

- a. Dr. Solis was the attending dentist for G [REDACTED] T [REDACTED] on or about:
  - i. February 5, 2013; and
  - ii. November 6, 2013.



- b. On or about February 5, 2013, two bite wing x-rays were taken of this patient.
- c. On or about November 6, 2013, two bite wings and two periapical x-rays were taken of this patient.

**17. R ■ T ■**

- a. Dr. Solis was the attending dentist for R ■ T ■ on or about:
  - i. May 7, 2013.
- b. On or about May 7, 2013, two bite wings and two periapical x-rays were taken of this patient.
- c. On or about December 11, 2013, two bite wings and two periapical x-rays were taken of this patient.

**18. G ■ Y ■**

- a. Dr. Solis was the attending dentist for G ■ Y ■ on or about February 23, 2011.
- b. On or about February 23, 2011, two bite wing x-rays were taken of this patient.

**19. S ■ I ■**

- a. On or about March 26, 2007, Dr. Solis took an x-ray image of S ■ I ■'s healing fractured wrist.

**II. AGREED FACTS RELATING TO BILLINGS (ALLEGATIONS 3-5)**

***20. Billing for services provided to one patient under the name of another***

- a. On or about November 14, 2012, Dr. Solis was the attending dentist for L ■ G ■.
- b. In or around July 2012, Dr. Solis was the attending dentist for S ■ C ■<sup>1</sup> when a restoration was performed or replaced.
- c. On or about July 5, 2012, S ■ C ■<sup>2</sup> was billed for a restoration.
- d. In or around July 2012, scaling was provided and bite wings taken for S ■ C ■<sup>1</sup>.
- e. On or about July 4, 2012, S ■ C ■<sup>2</sup> was billed for a periodontal re-evaluation, scaling, desensitization, and two periapical radiographs.
- f. Dr. Solis was the attending dentist for S ■ C ■<sup>1</sup> on or about July 24, 2012.
- g. Joanne Evenden was the treating hygienist for S ■ C ■<sup>1</sup> for July 24, 2012.
- h. On or about July 24, 2012, S ■ C ■<sup>1</sup> received a desensitization and had x-rays taken.

- i. S [REDACTED] C [REDACTED]'s financial records do not show any billing for this visit.
- j. Dr. Solis was the attending dentist for D [REDACTED] M [REDACTED] on or about November 7, 2012.
- k. On or about October 23, 2013, T [REDACTED] I [REDACTED] was billed for a panoramic x-ray.
- l. No panoramic x-ray for T [REDACTED] I [REDACTED] for October 23, 2013, was provided to the College.
- m. Dr. Solis was the attending dentist for J [REDACTED] I [REDACTED] on October 23, 2013.
- n. A panoramic x-ray for J [REDACTED] I [REDACTED], dated October 23, 2013, was provided to the College.
- o. J [REDACTED] I [REDACTED] was not billed for a panoramic x-ray on or about October 23, 2013.

## **21. Billing for examinations**

- a. On or about June 10, 2013, Dr. Solis was the attending dentist for C [REDACTED] B [REDACTED].
- b. On or about June 10, 2013, C [REDACTED] B [REDACTED] was charged for:
  - i. a complete examination;
  - ii. two bite wing x-rays;
  - iii. two periapical x-rays;
  - iv. three units of scaling;
  - v. one unit of polish; and
  - vi. fluoride treatment.
- c. On or about January 28, 2014, Dr. Solis was the attending dentist for C [REDACTED] B [REDACTED].
- d. On or about January 28, 2014, C [REDACTED] B [REDACTED] was charged for:
  - i. exam and diagnosis (recall);
  - ii. two periapical x-rays;
  - iii. two bite wing x-rays;
  - iv. one unit of polishing;
  - v. three units of scaling; and
  - vi. fluoride treatment.
- e. On or about May 21, 2013, Dr. Solis was the attending dentist for B [REDACTED] C [REDACTED].
- f. On or about May 21, 2013, B [REDACTED] C [REDACTED] was charged for a specific examination.
- g. On or about August 19, 2013, Dr. Solis was the attending dentist for B [REDACTED] C [REDACTED].
- h. On or about August 19, 2013, B [REDACTED] C [REDACTED] was charged for a periodontal re-evaluation, three units of scaling, and desensitization.
- i. On or about November 14, 2013, Dr. Solis was the attending dentist for B [REDACTED] C [REDACTED].
- j. On or about November 14, 2013 B [REDACTED] C [REDACTED] was charged for a periodontal re-evaluation, 3 units of scale and desensitization.
- k. On or about February 19, 2013, Dr. Solis was the attending dentist for W [REDACTED] C [REDACTED].
- l. On or about February 19, 2013, W [REDACTED] C [REDACTED] was charged for a recall examination, two periapical x-rays, three units of scale, fluoride treatment, polish, oral hygiene instruction.
- m. Dr. Tran was the attending dentist for W [REDACTED] C [REDACTED] on or about November 26, 2013, per Teegan Todd's hygiene notes for this date.

- n. On or about February 16, 2012, Dr. Solis was the attending dentist for B [REDACTED] F [REDACTED].
- o. On or about February 16, 2012, B [REDACTED] F [REDACTED] was billed for one unit of time and three units of scaling.
- p. On or about February 16, 2012, Joanne Evenden was the treating hygienist for B [REDACTED] F [REDACTED].
- q. On or about February 1, 2012, Dr. Solis was the attending dentist for K [REDACTED] G [REDACTED].
- r. On or about February 1, 2012, K [REDACTED] G [REDACTED] was billed for a periodontal re-evaluation.
- s. On or about March 22, 2011, Dr. Solis was the attending dentist for B [REDACTED] G [REDACTED].
- t. On or about March 22, 2011, B [REDACTED] G [REDACTED] was billed for a complete examination, two bite wing x-rays, one panoramic x-ray, two periapical x-rays, three units of scaling, and polish.
- u. Joanne Evenden was the treating hygienist for B [REDACTED] G [REDACTED] on or about March 22, 2011.
- v. On or about January 5, 2009, Dr. Solis was the attending dentist for L [REDACTED] G [REDACTED].
- w. On or about January 5, 2009, L [REDACTED] G [REDACTED] was billed for a limited examination, scaling, and root planing.
- x. Joanne Evenden was the treating hygienist for this date.
- y. On or about June 15, 2009, Dr. Solis was the attending dentist for K [REDACTED] I [REDACTED].
- z. On or about June 15, 2009, Joanne Evenden was the treating hygienist for K [REDACTED] I [REDACTED].
- aa. On or about June 15, 2009, K [REDACTED] I [REDACTED] was billed for fluoride treatment, a recall exam, six periapical x-rays, two bite wing x-rays, polish and scale.
- bb. On or about June 19, 2013, Dr. Solis was the attending dentist for M [REDACTED] L [REDACTED].
- cc. On or about January 26, 2008, Dr. Solis was the attending dentist for V [REDACTED] R [REDACTED].
- dd. On or about January 26, 2008, V [REDACTED] R [REDACTED] was charged for a limited examination, root planning, local and irrigation.
- ee. Dr. Solis was the attending dentist for B [REDACTED] S [REDACTED] on or about:
  - i. January 13, 2011; and
  - ii. February 29, 2012.
- ff. On or about January 13, 2011, B [REDACTED] S [REDACTED] was billed for a recall examination, two units of scale, one unit of polish and fluoride treatment.
- gg. On or about February 29, 2012, B [REDACTED] S [REDACTED] was billed for a specific examination, two periapical x-rays and two units of scale.
- hh. Dr. Solis was the attending dentist for C [REDACTED] S [REDACTED] on or about:
  - i. February 29, 2012; and
  - ii. August 8, 2012.
- ii. On or about February 29, 2012, C [REDACTED] S [REDACTED]<sup>1</sup> was billed for three units of scaling, one unit of desensitization and one unit of time.

- jj. On or about August 8, 2012, C [REDACTED] S [REDACTED]<sup>1</sup> was billed for a recall examination, two bite wing x-rays, two periapical x-rays, polish, scale and fluoride.
- kk. Dr. Solis was the attending dentist for [REDACTED] S [REDACTED] on or about May 30, 2012.
- ll. On or about May 30, 2012, A [REDACTED] S [REDACTED] was billed for a periodontal re-evaluation and three units of scaling.
- mm. Joanne Evenden was the treating hygienist for A [REDACTED] S [REDACTED] on or about May 30, 2012.
- nn. On or about May 2, 2011, J [REDACTED] T [REDACTED] was billed for a recall examination, two bite wing x-rays, two periapical x-rays, three units of scale, polish, fluoride and oral hygiene instruction.
- oo. Dr. Solis was the attending dentist for R [REDACTED] T [REDACTED] on or about April 11, 2012.
- pp. Dr. Solis was the attending dentist for J [REDACTED] W [REDACTED] on or about:
  - i. October 27, 2009; and
  - ii. July 29, 2010.
- qq. On or about October 27, 2009, J [REDACTED] W [REDACTED] was billed for a recall examination, four units of scale, polish, fluoride and oral hygiene instruction.
- rr. On or about May 2, 2011, J [REDACTED] W [REDACTED] was billed for a recall examination, two bite wing x-rays, two periapical x-rays, three units of scale, fluoride and polish.
- ss. On or about July 29, 2010, J [REDACTED] W [REDACTED] was billed for a recall examination, four units of scale, fluoride and polish.
- tt. On or about May 3, 2011, S [REDACTED] W [REDACTED]<sup>1</sup> was billed for a periodontal re-evaluation, three units of scale and desensitization.
- uu. On or about October 17, 2011, S [REDACTED] W [REDACTED]<sup>1</sup> was billed for a recall examination, two periapical x-rays, two bite wing x-rays, polish, three units of scale and fluoride.
- vv. On or about October 17, 2011, Joanne Evenden was the treating hygienist for S [REDACTED] W [REDACTED].<sup>1</sup>
- ww. On or about November 2, 2011, Joanne Evenden was the treating hygienist for S [REDACTED] W [REDACTED].<sup>1</sup>
- xx. Dr. Solis was the attending dentist for S [REDACTED] W [REDACTED]<sup>2</sup> on or about:
  - i. December 14, 2007;
  - ii. July 24, 2008; and
  - iii. January 18, 2010.
- yy. On or about December 14, 2007, S [REDACTED] W [REDACTED]<sup>2</sup> was billed for a recall examination, two bite wing x-rays, 1 panoramic x-ray, one cephalometric x-ray, cast diagnostics, one unit of scale, polish and fluoride.
- zz. On or about July 24, 2008, S [REDACTED] W [REDACTED]<sup>2</sup> was billed for a recall examination, two bite wing x-rays, one unit of scale, fluoride and polish.

- aaa. Joanne Evenden was the treating hygienist for S [REDACTED] W [REDACTED]<sup>2</sup> on or about July 24, 2008.
- bbb. On or about January 18, 2010, S [REDACTED] W [REDACTED]<sup>2</sup> was billed for a recall examination, one panoramic x ray, polish, one unit of scale, and fluoride.
- ccc. Joanne Evenden was the treating hygienist for S [REDACTED] W [REDACTED]<sup>2</sup> on or about January 18, 2010.
- ddd. On or about March 5, 2012, S [REDACTED] W [REDACTED]<sup>2</sup> was billed for a recall examination and two bite wing x-rays, two units of scale, polish and fluoride.
- eee. On or about September 10, 2012, S [REDACTED] W [REDACTED]<sup>2</sup> was billed for a recall examination, two bite wing x-rays, polish, two units of scale and fluoride.
- fff. On or about January 25, 2011, S [REDACTED] W [REDACTED]<sup>2</sup> was billed for a recall examination, two bite wing x-rays, two periapical x-rays, polish, two units of scale and fluoride.
- ggg. Joanne Evenden was the treating hygienist for S [REDACTED] W [REDACTED]<sup>2</sup> on or about January 25, 2011.
- hhh. Dr. Solis was the attending dentist for G [REDACTED] Y [REDACTED] on or about November 24, 2011.

**22. Billing issues relating to S [REDACTED] C [REDACTED]<sup>2</sup>**

- a. On or about January 6, 2011, Joanne Evenden was the treating hygienist for S [REDACTED] C [REDACTED]<sup>2</sup>.
- b. On or about August 11, 2011, S [REDACTED] C [REDACTED]<sup>2</sup> was billed for a recall examination, radiographs (two bite wings), scaling, polishing, and fluoride treatment.
- c. On or about September 8, 2011, Joanne Evenden was the treating hygienist for S [REDACTED] C [REDACTED]<sup>2</sup>.
- d. On or about September 8, 2011, S [REDACTED] C [REDACTED]<sup>2</sup> was billed for a periodontal re-evaluation, desensitization and two units of scale.
- e. On or about March 21, 2012, S [REDACTED] C [REDACTED]<sup>2</sup> was billed for a recall examination, oral hygiene instruction, radiographs, scaling, polish, and a fluoride treatment.
- f. On or about January 6, 2011, Joanne Evenden was the treating hygienist for S [REDACTED] C [REDACTED]<sup>2</sup>.
- g. On or about September 24, 2012, S [REDACTED] C [REDACTED]<sup>2</sup> was billed for a recall examination, oral hygiene instruction, radiographs, scaling, polishing, and fluoride treatment.
- h. Dr. Solis was the attending dentist for S [REDACTED] C [REDACTED]<sup>2</sup> on or about January 8, 2013.
- i. On or about January 8, 2013 S [REDACTED] C [REDACTED]<sup>2</sup> was billed for 3 units of scaling, periodontal re-evaluation and desensitization.

- j. Dr. Solis was the attending dentist for S ■ C ■<sup>2</sup> on or about February 19, 2013.
- k. On or about February 19, 2013, S ■ C ■<sup>2</sup> was billed for a specific examination.
- l. Dr. Solis was the attending dentist for S ■ C ■<sup>2</sup> on or about June 3, 2013.
- m. On or about March 24, 2011, S ■ C ■<sup>2</sup> was billed for a gingivectomy.
- n. On or about March 24, 2011, Joanne Evenden was the treating hygienist for S ■ C ■<sup>2</sup>.

**23. Billing issues relating to D ■ M ■**

- a. Dr. Solis was the attending dentist for D ■ M ■ on or about May 7, 2013.
- b. On or about May 7, 2013, D ■ M ■ was billed for a recall examination, an oral hygiene instruction, radiographs, scaling, polishing, fluoride, and desensitization.
- c. Dr. Solis was the attending dentist for D ■ M ■ on or about July 4, 2012.
- d. On or about July 4, 2012, D ■ M ■ was billed for a periodontal re-evaluation, oral hygiene instruction, scaling, and desensitization.

**24. Billing issues relating to S ■ C ■<sup>1</sup>**

- a. On or about September 9, 2010, S ■ C ■<sup>1</sup> was billed for an irrigation.
- b. Joanne Evenden was the treating hygienist for S ■ C ■<sup>1</sup> on September 9, 2010.
- c. Dr. Solis was the attending dentist for S ■ C ■<sup>1</sup> on or about October 6, 2010.
- d. Joanne Evenden was the treating hygienist for S ■ C ■<sup>1</sup> on or about October 6, 2010.
- e. On or about October 6, 2010, S ■ C ■<sup>1</sup> was billed for:
  - i. An irrigation;
  - ii. Three units of scaling; and
  - iii. An oral hygiene instruction.
- f. On or about January 17 or 20, 2011, S ■ C ■<sup>1</sup> was billed for a periodontal re-evaluation and three units of scaling.
- g. Joanne Evenden was the treating hygienist for S ■ C ■<sup>1</sup> on or about January 17 or 20, 2011.
- h. On or about September 19, 2011, S ■ C ■<sup>1</sup> was billed for a recall examination, oral hygiene instruction, radiographs, scaling, polishing, and fluoride treatment.
- i. On or about March 12, 2012, S ■ C ■<sup>1</sup> was billed for a periodontal re-evaluation, scaling, and desensitization.

- j. On or about March 20, 2012, S ■ C ■ was billed for:
  - i. An oral hygiene instruction;
  - ii. radiographs;
  - iii. Scaling;
  - iv. Fluoride treatment;
  - v. A recall examination; and
  - vi. Polishing.
- k. Dr. Solis was the attending dentist for S ■ C ■ on or about April 4, 2012.
- l. On or about April 4, 2012, S ■ C ■ was billed for a flap approach with ostectomy.
- m. On or about April 4, 2012, S ■ C ■ received veneers.
- n. S ■ C ■ was not billed for the above veneers.
- o. Dr. Solis was the attending dentist for S ■ C ■ on or about October 20, 2010.
- p. Joanne Evenden was the treating hygienist for S ■ C ■ on or about October 20, 2010.
- q. On or about October 20, 2010, S ■ C ■ was billed for a gingivectomy.
- r. Dr. Solis was the attending dentist for S ■ C ■ on or about September 8, 2010.
- s. Joanne Evenden was the treating hygienist for S ■ C ■ on or about September 8, 2010.
- t. On or about September 8, 2010, S ■ C ■ was billed for:
  - i. A complete examination;
  - ii. Two bite wing x-rays;
  - iii. one panoramic x-ray; and
  - iv. Three units of scaling.
- u. No charting for a complete examination on this date was provided to the College.

**25. Billing issues relating to G ■ and K ■ L ■**

- a. On or about March 10, 2011, G ■ L ■ was billed for a gingivectomy.
- b. On or about March 7, 2011, K ■ L ■ was billed for a gingivectomy.

**26. Billing for X-Rays**

- a. Dr. Solis was the attending dentist for B ■ A ■ on or about March 5, 2012.
- b. On or about March 5, 2012, B ■ A ■ was billed for two periapical x- rays, a recall exam, two bite wing x-rays, polish, two units of scale and fluoride treatment.
- c. Two periapical x-rays for B ■ A ■ for March 5, 2012 were not provided to the College.

- d. Dr. Solis was the attending dentist for A [REDACTED] B [REDACTED] on or about:
  - i. February 12, 2009; and
  - ii. March 17, 2011.
- e. On or about February 12, 2009, A [REDACTED] B [REDACTED] was billed for four periapical x-rays, recall examination, polish, one unit of scale and root planing.
- f. One of the four periapical radiographs billed on or about February 12, 2009 was not provided to the College.
- g. On or about March 17, 2011, A [REDACTED] B [REDACTED] was billed for two bite wing x-rays, a recall examination, polish, scale, fluoride and oral hygiene instruction.
- h. Two bite wing radiographs for March 17, 2011 were not provided to the College.
- i. On or about September 29, 2011, A [REDACTED] B [REDACTED] was billed for two periapical x-rays, three units of scale, desensitization, and periodontal re-evaluation.
- j. Two periapical radiographs for September 29, 2011 were not provided to the College.
  
- k. Dr. Solis was the attending dentist for T [REDACTED] B [REDACTED]<sup>3</sup> on or about:
  - i. June 4, 2009;
  - ii. January 26, 2011.
- l. Two bite wing radiographs for June 4, 2009 were not provided to the College.
- m. On or about January 26, 2011, T [REDACTED] B [REDACTED]<sup>3</sup> was billed for one periapical x-ray, a recall examination, polish, three units of scale, fluoride, and oral hygiene instruction.
- n. One periapical radiograph for January 26, 2011, was not provided to the College.
- o. On or about July 28, 2011, T [REDACTED] B [REDACTED]<sup>3</sup> was billed for two bite wing x-rays, two periapical x-rays, three units of scale, polish, fluoride, recall examination and oral hygiene instruction.
- p. On or about October 31, 2011, T [REDACTED] B [REDACTED]<sup>3</sup> was billed for four periapical radiographs, scaling, desensitization, and periodontal reevaluation. Four periapical x-rays were not provided to the College.
  
- q. Dr. Solis was the attending dentist for T [REDACTED] B [REDACTED]<sup>2</sup> on or about March 5, 2012.
- r. On or about March 5, 2012, T [REDACTED] B [REDACTED]<sup>2</sup> was billed for two periapical x-rays, a recall exam, two bite wing x-rays, polish, scale and fluoride.
- s. Periapical x-rays matching this billing were not provided to the College.
  
- t. Dr. Solis was the attending dentist for D [REDACTED] C [REDACTED] on or about March 13, 2009.
- u. On or about March 13, 2009, D [REDACTED] C [REDACTED] was billed for three periapical x-rays, two bite wing x-rays, a complete exam, polish, and scaling.
- v. Two of these three periapical radiographs were not provided to the College.
- w. On or about August 27, 2012, D [REDACTED] C [REDACTED] was billed for four periapical x-rays and three units of scaling.
- x. None of these radiographs were provided to the College.



- y. On or about March 31 or April 4, 2011, B [REDACTED] C [REDACTED] was billed for two periapical x-rays, a recall examination, two bite wing x-rays, polish, three units of scale, fluoride and oral hygiene instruction.
- z. One of the two periapical radiographs billed was not provided to the College.
  
- aa. Dr. Solis was the attending dentist for B [REDACTED] G [REDACTED] on or about November 14, 2012.
- bb. Two bite wings for B [REDACTED] G [REDACTED] on November 14, 2012 were not provided to the College.
- cc. On or about March 22, 2011, B [REDACTED] G [REDACTED] was billed for a complete examination, two bite wing x-rays, one panoramic x-ray, two periapical x-rays, three units of scaling, and polish.
- dd. This panoramic radiograph was not provided to the College.
- ee. Joanne Evenden was the treating hygienist for B [REDACTED] G [REDACTED] on or about March 22, 2011.
  
- ff. On or about May 24, 2011, L [REDACTED] G [REDACTED] was billed for three periapical x-rays and three units of scaling.
- gg. One of these three radiographs was not provided to the College.
- hh. Joanne Evenden was the treating hygienist for L [REDACTED] G [REDACTED] on or about April 2, 2012.
  
- ii. Dr. Solis was the attending dentist for T [REDACTED] I [REDACTED] on or about October 29, 2013.
- jj. On or about October 29, 2013, T [REDACTED] I [REDACTED] was billed for two bite wing x-rays, two periapical x-rays, one panoramic x-ray, a complete exam, polish, four units of scale and fluoride treatment.
- kk. None of these radiographs were provided to the College.
  
- ll. On or about July 27, 2010, M [REDACTED] K [REDACTED] was billed for six periapical x-rays, three units of scale and a periodontal re-evaluation.
- mm. None of these radiographs were provided to the College.
  
- nn. Dr. Solis was the attending dentist for G [REDACTED] L [REDACTED] on or about May 25, 2011.
- oo. On or about May 25, 2011, G [REDACTED] L [REDACTED] was billed for two bite wing x-rays, a recall examination, polish, three units of scaling, fluoride, and oral hygiene instruction.
- pp. These radiographs were not provided to the College.
  
- qq. Dr. Solis was the attending dentist for G [REDACTED] L [REDACTED] on or about February 27 or 28, 2012.
- rr. On or about February 27 or 28, 2012, G [REDACTED] L [REDACTED] was billed for two bite wing x-rays, a recall examination, polish, scale, fluoride, and oral hygiene instruction.
- ss. These radiographs were not provided to the College.
  
- tt. On or about August 16, 2011, K [REDACTED] L [REDACTED] was billed for two bite wing x-rays, a recall examination, polish, three units of scale, and fluoride treatment.
- uu. These radiographs were not provided to the College.
  
- vv. On or about October 25, 2010, D [REDACTED] P [REDACTED] was billed for two periapical x-rays, four periapical x-rays, a new patient exam and one panoramic x-ray.
- ww. Only one periapical radiograph for this date was provided to the College.

- xx. Joanne Evenden was the treating hygienist for D [REDACTED] P [REDACTED] on or about October 25, 2010.
- yy. On or about December 6, 2011, B [REDACTED] S [REDACTED] was billed for two periapical x-rays, a recall examination, two bite wing x-rays, polish, scale and fluoride treatment.
- zz. Two periapical x-rays billed on or about December 6, 2011 were not provided to the College.
- aaa. Dr. Solis was the attending dentist for B [REDACTED] S [REDACTED] on or about February 29, 2012.
- bbb. On or about February 29, 2012, B [REDACTED] S [REDACTED] was billed for two periapical x-rays, a specific exam, and two units of scale.
- ccc. These radiographs were not provided to the College.
- ddd. On or about January 13, 2011, Dr. Solis was the attending dentist for S [REDACTED] S [REDACTED].
- eee. On or about January 13, 2011, S [REDACTED] S [REDACTED] was billed for two bite wing x-rays, a recall examination, polish, three units of scale and fluoride treatment.
- fff. Two bite wing x-rays were not provided to the College.
- ggg. On or about September 18, 2012, P [REDACTED] T [REDACTED] was billed for four periapical x-rays, two bite wing x-rays, a complete exam, one panoramic x-ray, polish, and three units of scaling.
- hhh. Only two periapical x-rays for this date were provided to the College.
- iii. Joanne Evenden was the treating hygienist for P [REDACTED] T [REDACTED] on or about September 18, 2012.
- jjj. On or about April 30, 2012, G [REDACTED] T [REDACTED] was billed for four periapical x-rays, a complete exam, two bite wing x-rays, and one panoramic x-ray.
- kkk. Only two periapical x-rays for this date were provided to the College.
- lll. Dr. Solis was the attending dentist for R [REDACTED] T [REDACTED] on or about April 11, 2012.
- mmm. On or about April 11, 2012, R [REDACTED] T [REDACTED] was billed for four bite wing x-rays, two periapical x-rays, a recall examination, polish, three units of scale and fluoride treatment.
- nnn. No x-rays for this date matching these billings were provided to the College.

**27. Billing issues relating to K [REDACTED] I [REDACTED]**

- a. On or about May 7, 2007, K [REDACTED] I [REDACTED] was billed for a panoramic radiograph and a cephalometric radiograph.
- b. These radiographs were not provided to the College.
- c. On or about December 1, 2008, K [REDACTED] I [REDACTED] was billed for two bite wing radiographs, a recall examination, scaling, polishing, fluoride and an oral hygiene instruction.

- d. No bite wing radiographs for this date were provided to the College.
- e. On or about June 15, 2009, K [REDACTED] I [REDACTED] was billed for fluoride treatment, a recall exam, six periapical x-rays, two bite wing x-rays, polish and scale.
- f. Joanne Evenden was the treating hygienist for K [REDACTED] I [REDACTED] on or about June 15, 2009.
- g. On or about February 27, 2012, K [REDACTED] I [REDACTED] was billed for a complete examination, two bite wing x-rays, one panoramic x-ray, polish, scale, fluoride and oral hygiene instruction.
- h. On or about February 27, 2012, Joanne Evenden was the treating hygienist for K [REDACTED] I [REDACTED].
- i. K [REDACTED] I [REDACTED] was a named beneficiary under her father's dental benefit plan.
- j. J [REDACTED] I [REDACTED] was a named beneficiary under his father's dental benefit plan.
- k. K [REDACTED] I [REDACTED] received a Hawley retainer from Dr. Solis.

**28. Billing issues relating to S [REDACTED] I [REDACTED]**

- a. On or about January 8, 2008, Dr. Solis was the attending dentist for S [REDACTED] I [REDACTED]
- b. On or about January 8, 2008, S [REDACTED] I [REDACTED] was billed for a denture.

**29. Billing issues relating to D [REDACTED] C [REDACTED]**

- a. On or about August 27, 2012, D [REDACTED] C [REDACTED] was billed for three units of scaling and four periapical x-rays.

**30. Billing issues relating to L [REDACTED] G [REDACTED]**

- a. Joanne Evenden was the treating hygienist for L [REDACTED] G [REDACTED] on or about April 2, 2012.

**31. Billing issues relating to B [REDACTED] C [REDACTED]**

- a. On or about February 6, 2013, B [REDACTED] C [REDACTED] was billed for desensitization and three units of scaling.
- b. On or about March 31, 2011 B [REDACTED] C [REDACTED] was billed for oral hygiene instruction, fluoride treatment, three units of scaling, one unit of polish, two bite wing x-rays, two periapical x-rays, and a recall examination.

**32. Billing issues relating to R [REDACTED] J [REDACTED]**

- a. On or about March 19, 2012, R [REDACTED] J [REDACTED] was billed for desensitization, three units of scale and a periodontal re-evaluation.
- b. On or about March 19, 2012, Dr. Trotti was the treating dentist for R [REDACTED] J [REDACTED].

**33. Billing issues relating to G [REDACTED] Y [REDACTED]**

- a. Dr. Solis was the attending dentist for G [REDACTED] Y [REDACTED] on or about November 24, 2011.
- b. On or about November 24 or 28, 2011, G [REDACTED] Y [REDACTED] was billed for fluoride treatment, a recall examination, polish, three units of scale, desensitization and oral hygiene instruction.

**34. Billing issues relating to S [REDACTED] W [REDACTED]<sup>1</sup>**

- a. Dr. Solis was the attending dentist for S [REDACTED] W [REDACTED]<sup>1</sup> on or about March 3, 2010.
- b. On or about March 3, 2010, S [REDACTED] W [REDACTED]<sup>1</sup> was billed for a complete examination.
- c. A recall examination, not a complete examination, was performed on S [REDACTED] W [REDACTED]<sup>1</sup>

**35. Billing issues relating to S [REDACTED] W [REDACTED]<sup>2</sup>**

- a. On or about June 11, 2013, S [REDACTED] W [REDACTED]<sup>2</sup> was billed for a complete examination, two periapical x-rays, two bite wing x-rays, one panoramic x-ray, polish, three units of scale and fluoride treatment.

**36. Billing issues relating to B [REDACTED] W [REDACTED]**

- a. Dr. Solis was the attending dentist for B [REDACTED] W [REDACTED] on or about December 14, 2007.
- b. On or about December 14, 2007, B [REDACTED] W [REDACTED] was billed for a specific examination, polish and a fluoride treatment.
- c. Joanne Evenden was the treating hygienist for B [REDACTED] W [REDACTED] on or about December 14, 2007.

**37. Billing issues relating to Local Anesthetic**

- a. The following patients were charged for local anesthetic for the following amounts on or about the following dates:
  - i. T [REDACTED] B [REDACTED]<sup>1</sup> – March 14, 2012 (\$17.00);
  - ii. L [REDACTED] C [REDACTED] – March 29, 2009 (\$14.28);
  - iii. C [REDACTED] F [REDACTED] – February 22, 2012 (\$15.00);

- iv. N████ G████ – April 15, 2008 & August 30, 2010;
  - v. R████ J████ – May 13, 2008 (\$14.28), May 21, 2008 (\$14.28) & May 27, 2008 (\$14.28);
  - vi. A████ K████ – January 15, 2008 & January 22, 2008 (\$14.28);
  - vii. A████ P████ – August 10, 2010 (\$14.22);
  - viii. S████ P████ – February 4, 2008 (\$14.28) & February 19, 2008 (\$14.28);
  - ix. V████ R████ – January 26, 2008 (\$14.28);
  - x. D████ T████ – November 12, 2008 (\$14.00) & November 20, 2008;
  - xi. S████ W████ – March 10, 2008 (\$14.28);
  - xii. J████ W████ – July 21, 2010 (\$14.22);
  - xiii. P████ M████ – July 13, 2010;
  - xiv. T████ M████ – August 27, 2012 (\$15.00) & September 17, 2012 (\$15.00);
  - xv. R████ O████ – December 15, 2011 (\$15.00);
  - xvi. D████ P████ – November 4, 2010 (\$14.22)
  - xvii. G████ P████ – September 16, 2010 (\$14.22); and
  - xviii. G████ Z████ – March 19, 2012 (\$15.00) & May 22, 2012 (\$15.00).
- b. The above patients were charged for local anesthetic in conjunction with scaling or restorative treatment.
  - c. On or about March 14, 2012, Dr. Solis was the attending dentist for T████ B████.<sup>1</sup>
  - d. On or about March 29, 2008, Dr. Solis was the attending dentist for L████ C████.
  - e. On or about February 22, 2012, Dr. Solis was the attending dentist for C████ F████.
  - f. Dr. Solis was the attending dentist for N████ G████ on or about:
    - i. April 15, 2008; and
    - ii. August 30, 2010.
  - g. Dr. Solis was the attending dentist for R████ J████ on or about:
    - i. May 13, 2008;
    - ii. May 21, 2008; and
    - iii. May 27, 2008.
  - h. Dr. Solis was the attending dentist for A████ K████ on or about:
    - i. January 15, 2008; and
    - ii. January 22, 2008.
  - i. Dr. Trotti was the treating dentist for G████ P████ on or about September 16, 2010.
  - j. Dr. Solis was the attending dentist for S████ P████ on or about:
    - i. February 4, 2008; and
    - ii. February 19, 2008.
  - k. Dr. Solis was the attending dentist for V████ R████ on or about January 26, 2008.
  - l. Dr. Solis was the attending dentist for D████ T████ on or about:
    - i. November 12, 2008; and
    - ii. November 20, 2008.
  - m. On or about March 10, 2008, Dr. Solis was the attending dentist for S████ W████.<sup>1</sup>
  - n. On or about July 21, 2010, Dr. Solis was the attending dentist for J████ W████.

**38. Billing issues relating to C S<sup>2</sup>**

- a. On or about March 8, 2012, C S<sup>2</sup> was billed for scaling and desensitization.
- b. On or about June 18, 2012, C S<sup>2</sup> was billed for three units of scaling.

**39. Billing issues relating to T S**

- a. Dr. Solis was the attending dentist for T S on or about:
  - i. November 7, 2012;
  - ii. November 14, 2012.
- b. On or about November 7, 2012, T S was billed for an emergency examination and desensitization.
- c. On or about November 8, 2012, T S was billed for a recall examination, x-rays, scaling, polish, and oral hygiene instruction.

**40. Billing issues relating to Incorrect Dates**

- a. In or around December 21, 2010, a claim for services provided to B A was submitted.
- b. In or around December 22, 2010, a claim for services to T B<sup>2</sup> was submitted.
- c. On or about February 12, 2009, Dr. Solis was the attending dentist for C B.
- d. On or about December 12, 2008, B C was billed for a complete examination.
- e. There was no dentist in the office on December 12, 2008, to perform a complete examination.
- f. On or about December 17, 2008, Dr. Solis was the attending dentist for B C.
- g. On or about December 12, 2011, an emergency examination was performed for L G.
- h. The claim for this examination was submitted January 3, 2012, with an incorrect date.
- i. Dr. Solis was the attending dentist for K I on or about:
  - i. May 27, 2008.
- j. Dr. Solis was the attending dentist for S I on or about:
  - i. March 30, 2007; and
  - ii. April 5, 2007.
- k. On or about July 16, 2012, T M was billed for scaling, polishing, and fluoride.
- l. On or about August 27, 2012, T M was billed for local anesthetic and scaling.

- m. On or about September 17, 2012, T [REDACTED] M [REDACTED] was billed for local anesthetic and scaling.

**41. Billing issues relating to Claims for Periapical X-Rays**

- a. Four bite wing x-rays and one panoramic x-ray was provided to the College for C [REDACTED] B [REDACTED] for February 13, 2012
- b. Periapical x-rays matching the February 13, 2012 billing were not provided to the College.
- c. On or about November 26, 2012, C [REDACTED] B [REDACTED] was billed for two bite wings and two periapical x-rays.
- d. Four bite wing x-rays were provided to the College for C [REDACTED] B [REDACTED] for this date.
- e. Periapical x-rays matching this billing were not provided to the College.
- f. On or about February 23, 2012, D [REDACTED] C [REDACTED] was billed for one bite wing x-ray, two periapical x-rays, a recall examination, polish, fluoride and scaling.
- g. Two bite wing x-rays were provided to the College for D [REDACTED] C [REDACTED] for this date.
- h. Periapical x-rays matching this billing were not provided to the College.
- i. Joanne Evenden was the treating hygienist for D [REDACTED] C [REDACTED] on or about February 23, 2012.
- j. Four bite wing x-rays were provided to the College for S [REDACTED] C [REDACTED]<sup>2</sup> for May 19, 2011.
- k. Periapical x-rays matching S [REDACTED] C [REDACTED]<sup>1</sup>'s May 19, 2011 billing were not provided to the College.
- l. On or about April 30, 2012, F [REDACTED] C [REDACTED] was billed for two bite wing x-rays, two periapical x-rays, a recall examination, three units of scale and polish.
- m. Four bite wing x-rays were provided to the College for F [REDACTED] C [REDACTED] for this date.
- n. Periapical x-rays matching this billing were not provided to the College.
- o. Four bite wing x-rays were provided to the College for B [REDACTED] F [REDACTED] for August 20, 2012.
- p. Periapical x-rays matching the August 20, 2012 billing were not provided to the College.
- q. On or about March 22, 2011, B [REDACTED] G [REDACTED] was billed for a complete examination, two bite wing x-rays, one panoramic x-ray, two periapical x-rays, three units of scaling, and polish.
- r. Four bite wing x-rays were provided to the College for B [REDACTED] G [REDACTED] for this date.
- s. Periapical x-rays matching this billing were not provided to the College.
- t. Joanne Evenden was the treating hygienist for this date.
- u. On or about October 6, 2011, B [REDACTED] G [REDACTED] was billed for a recall examination, two periapical x-rays, two bite wing x-rays, polish, and three units of scaling.
- v. Four bite wing x-rays and one periapical x-ray were provided to the College for B [REDACTED] G [REDACTED] for this date.

- w. On or about May 14, 2012, B █ G █ was billed for two bite wing x-rays, two periapical x-rays, polish, a recall examination, fluoride treatment and three units of scaling.
- x. Four bite wing x-rays were provided to the College for B █ G █ for this date.
- y. Periapical x-rays matching this billing were not provided to the College.
- z. Joanne Evenden was the treating hygienist for B █ G █ on or about May 14, 2012.
  
- aa. On or about November 6, 2012, L █ █ was billed for four periapical x-rays.
- bb. Periapical x-rays matching this billing were not provided to the College.
- cc. Joanne Evenden was the treating hygienist for L █ █ on or about November 6, 2012.
  
- dd. On or about February 14, 2011, K █ I █ was billed for two periapical x-rays, two bite wing x-rays, two units of scale, polish, fluoride treatment and a recall examination.
- ee. Four bite wing x-rays for K █ I █ were provided to the College for this date.
- ff. No periapical x-rays matching this billing were provided to the College.
- gg. Joanne Evenden was the treating hygienist for K █ I █ on or about February 14, 2011.
- hh. Four bite wing x-rays for K █ I █ were provided to the College for August 22, 2011.
- ii. No periapical x-rays matching K █ I █'s August 22, 2011 billing were provided to the College.
- jj. Four bite wing x-rays for K █ I █ were provided to the College for September 6, 2012.
- kk. No periapical x-rays matching the September 6, 2012 billing were provided to the College.
  
- ll. Four bite wings and one periapical x-ray were provided to the College for M █ L █ for July 19, 2011.
- mm. Four bite wings and three periapical x-rays were provided to the College for M █ L █ for July 17, 2012.
  
- nn. On or about May 7, 2012, D █ M █ was billed for two bite wing x-rays, two periapical x-rays, a recall examination, polish, fluoride and three units of scale.
- oo. Four bite wing x-rays were provided to the College for D █ M █ for this date.
- pp. Periapical x-rays matching this billing were not provided to the College.
  
- qq. On or about September 15, 2011, S █ N █ was billed for two bite wing x-rays, two periapical x-rays, two units of scale, polish, fluoride, and a recall examination.
- rr. Four bite wing x-rays were provided to the College for S █ N █ for this date.
- ss. Periapical x-rays matching this billing were not provided to the College.
  
- tt. On or about October 25, 2010, D █ P █ was billed for periapical x-rays, a complete examination, and one panoramic x-ray.
- uu. D █ P █ was not billed for bite wing x-rays for October 25, 2010.
  
- vv. Dr. Solis was the attending dentist for C █ S █<sup>3</sup> on or about March 6, 2013.



- ww. Two bite wings and one panoramic x-ray were provided to the College for C [REDACTED]ia S [REDACTED]<sup>3</sup> for March 6, 2013.
- xx. No periapical x-rays matching the March 6, 2013 billing were provided to the College.
- yy. Dr. Solis was the attending dentist for A [REDACTED] S [REDACTED] on or about March 26, 2013.
- zz. On or about March 26, 2013, A [REDACTED] S [REDACTED] was billed for two bite wing x-rays, two periapical x-rays, polish, fluoride, a recall examination and three units of scale.
- aaa. Four bite wings for A [REDACTED] S [REDACTED] were provided to the College for March 26, 2013.
- bbb. No periapical x-rays matching this billing were provided to the College.
- ccc. On or about May 2, 2011, J [REDACTED] T [REDACTED] was billed for a recall examination, two bite wing x-rays, two periapical x-rays, three units of scale, polish, fluoride and oral hygiene instruction.
- ddd. Four bite wing x-rays for J [REDACTED] T [REDACTED] were provided to the College for May 2, 2011.
- eee. No periapical x-rays matching the May 2, 2011 billing were provided to the College.
- fff. On or about December 2, 2013, J [REDACTED] T [REDACTED] was billed for four periapical x-rays, a recall examination, polish, fluoride and three units of scale
- ggg. Two bite wing x-rays and two periapical x-rays for the patient for December 2, 2013, were provided to the College.
- hhh. J [REDACTED] T [REDACTED]a was not billed for bite wing x-rays on December 2, 2013.
- iii. Dr. Solis was the attending dentist for P [REDACTED] T [REDACTED] on or about May 7, 2013.
- jjj. On or about May 7, 2013, P [REDACTED] T [REDACTED] was billed for two periapical x-rays, fluoride treatment, polish, a recall examination and three units of scale.
- kkk. No periapical x-rays matching this billing were provided to the College.
- lll. Two bite wing x-rays for this patient for May 7, 2013 were provided to the College.
- mmm. The patient was not billed for bite wing x-rays on May 7, 2013.

#### ***42. Billing issues related to claims for bite wing x-rays***

- a. Dr. Solis was the attending dentist for S [REDACTED] I [REDACTED] on or about March 26, 2007.
- b. On or about March 26, 2007, S [REDACTED] I [REDACTED] was billed for two bite wing x-rays, one panoramic x-ray, intraoral radiograph, and an examination/diagnostics.
- c. Bite wing x-rays were not taken of S [REDACTED] I [REDACTED] on this date.
- d. Periapical x-rays were taken of S [REDACTED] I [REDACTED] on this date.

#### ***43. Billing issues relating to claims for periapical x-rays when panoramic x-ray taken***

- a. Dr. Solis was the attending dentist for C [REDACTED] S [REDACTED]<sup>1</sup> on or about August 8, 2012.

- b. On or about August 8, 2012, C [REDACTED] r S [REDACTED]<sup>1</sup> was billed for two periapical x-rays, polish, fluoride treatment, two bite wing x-rays, a recall examination and three units of scaling.
- c. One panoramic x-ray was provided to the College for this date.
- d. A panoramic x-ray was not billed for this date for C [REDACTED] S [REDACTED].<sup>1</sup>
- e. No periapical x-rays for this date were provided to the College.

**44. Billing issues relating to T [REDACTED] B [REDACTED]<sup>1</sup>**

- a. Dr. Solis was the attending dentist for T [REDACTED] B [REDACTED]<sup>1</sup> on or about March 30, 2011.

**III. AGREED FACTS RELATING TO CO-PAYMENTS (ALLEGATION 6)**

**1. A [REDACTED] B [REDACTED]**

- a. On or about December 22, 2009, a claim on insurance for A [REDACTED] B [REDACTED] for which a co-payment was required was submitted under Dr. Solis's name.
- b. Billing for this patient on December 22, 2009 was \$324.86.

**2. K [REDACTED] I [REDACTED]**

- a. On or about March 7, 2013, a claim on insurance for K [REDACTED] I [REDACTED] for which a co-payment was required was submitted under Dr. Solis's name.
- b. This co-payment was never collected in full.
- c. The third party payer did not provide its written consent not to collect the co-payment.

**3. J [REDACTED] J [REDACTED]**

- a. On or about March 27, 2013, and October 23, 2013, claims on insurance for J [REDACTED] J [REDACTED] for which co-payments were required were submitted under Dr. Solis's name.
- b. The third party payer did not provide its written consent not to collect the co-payment.

**4. B [REDACTED] S [REDACTED]**

- a. On or about November 25, 2010, April 19, 2011, March or May 29, 2011, June 15, 2011, July 20, 2011, October 18, 2011, and/or November 22, 2011, claims on insurance for

B [REDACTED] S [REDACTED] for which co-payments were required were submitted under Dr. Solis's name.

- b. These co-payments were never collected.
- c. The third party payer did not provide its written consent not to collect the co-payments.

5. R [REDACTED] T [REDACTED]

- a. Billing for R [REDACTED] T [REDACTED] on or about January 9, 2008, was \$112.49.
- b. The third party payer did not provide its written consent not to collect the deductibles.

#### IV. AGREED FACTS RELATING TO PROVISION OF RECORDS (ALLEGATION 7)

1. A [REDACTED] B [REDACTED]

- a. On or about May 7, 2014, the College requested that Dr. Solis provide complete patient records for A [REDACTED] B [REDACTED].
- b. The following documents were provided to the College on or about May 7, 2014:
  - i. Treatment History Report; and
  - ii. Client Ledger card.
- c. Progress and hygiene notes for this patient were not provided to the College.

2. T [REDACTED] B [REDACTED]<sup>3</sup>

- a. On or about May 7, 2014, the College requested that Dr. Solis provide complete patient records for T [REDACTED] B [REDACTED].<sup>3</sup>
- b. The following documents were provided to the College on or about May 7, 2014:
  - i. Treatment History Report; and
  - ii. Client Ledger card.
- c. Progress and hygiene notes for this patient were not provided to the College.

3. S [REDACTED] C [REDACTED]<sup>1</sup>

- a. On or about May 7, 2014, the College requested that Dr. Solis provide complete patient records for S [REDACTED] C [REDACTED].<sup>1</sup> On June 16, 2015, the College requested that Dr. Solis provide lab invoices for S [REDACTED] C [REDACTED]<sup>1</sup> from 2007 to 2014.
- b. The following documents were provided to the College on or about May 7, 2014:
  - a. Treatment history report;
  - b. X-rays;

- c. Client ledger card;
- d. Client statement; and
- e. Insurance statements.

4. L [REDACTED] C [REDACTED]

- a. On or about June 16, 2015, the College requested that Dr. Solis provide complete patient records for L [REDACTED] C [REDACTED]
- b. The following documents were provided to the College on or about June 16, 2015:
  - i. X-rays; and
  - ii. Insurance Statements.
- c. Progress and hygiene notes for this patient were not provided to the College.

5. J [REDACTED] I [REDACTED]

- a. On or about June 16, 2015, the College requested that Dr. Solis provide complete patient records for J [REDACTED] I [REDACTED].
- b. The following documents were provided to the College on or about June 16, 2015:
  - a. X-rays; and
  - b. Client Statement.
- c. Progress and hygiene notes for this patient were not provided to the College.

6. K [REDACTED] I [REDACTED]

- a. On or about May 7, 2014, the College requested that Dr. Solis provide complete patient records for K [REDACTED] I [REDACTED]. On June 16, 2015, the College asked Dr. Solis to provide models for K [REDACTED] I [REDACTED] from 2007.
- b. The following documents were provided to the College on or about May 7, 2014:
  - a. Treatment history report;
  - b. X-rays; and
  - c. Client ledger card.

7. T [REDACTED] I [REDACTED]

- a. On or about May 7, 2014, the College requested that Dr. Solis provide complete patient records for T [REDACTED] I [REDACTED]
- b. The following documents were provided to the College on or about May 7, 2014:
  - a. X-rays;
  - b. Client ledger card; and

- c. Treatment history report.
- c. Progress and hygiene notes for this patient were not provided to the College.

**8. M ■ K ■**

- a. On or about June 16, 2015, the College requested that Dr. Solis provide complete patient records for M ■ K ■
- b. The following documents were provided to the College on or about June 16, 2015:
  - i. Client statement; and
  - ii. X-rays.
- c. Progress and hygiene notes for this patient were not provided to the College.

**9. A ■ K ■**

- a. On or about June 16, 2015, the College requested that Dr. Solis provide complete patient records for A ■ K ■
- b. The following documents were provided to the College on or about June 16, 2015:
  - i. X-rays.
- c. Progress notes and hygiene notes for this patient were not provided to the College.

**10. G ■ L ■**

- a. On or about June 16, 2015, the College requested that Dr. Solis provide the complete patient records for G ■ L ■.
- b. The following documents were provided to the College on or about June 16, 2015:
  - i. X-rays;
  - ii. Client statement; and
  - iii. Insurance statements.
- c. Progress and hygiene notes for this patient were not provided to the College.

**11. K ■ L ■**

- a. On or about June 16, 2015, the College requested that Dr. Solis provide the complete patient records for K ■ L ■.
- b. The following documents were provided to the College on or about June 16, 2015:
  - i. Client statement; and
  - ii. X-rays.
- c. Progress and hygiene notes for this patient were not provided to the College.

**12. P [REDACTED] M [REDACTED]**

- a. On or about June 16, 2015, the College requested that Dr. Solis provide the complete patient records for P [REDACTED] M [REDACTED].
- b. The following documents were provided to the College on or about June 16, 2015:
  - i. Insurance statements; and
  - ii. X-rays.
- c. Progress and hygiene notes for this patient were not provided to the College.

**13. C [REDACTED] R [REDACTED]**

- a. On or about June 16, 2015, the College requested that Dr. Solis provide the complete patient records for C [REDACTED] R [REDACTED].
- b. The following documents were provided to the College on or about June 16, 2015:
  - i. X-rays; and
  - ii. Client statement.
- c. Progress and hygiene notes for this patient were not provided.

**14. S [REDACTED] S [REDACTED]**

- a. On or about May 7, 2014, the College requested that Dr. Solis provide the complete patient records for S [REDACTED] S [REDACTED].
- b. The following documents were provided to the College on or about May 7, 2014:
  - a. Treatment history report;
  - b. X-rays; and
  - c. Client ledger card.
- c. Progress and hygiene notes for this patient were not provided to the College.

H150017

**THE DISCIPLINE COMMITTEE OF THE  
ROYAL COLLEGE OF DENTAL SURGEONS OF ONTARIO**

**IN THE MATTER OF** a Hearing of a panel of the Discipline Committee of the Royal College of Dental Surgeons of Ontario held pursuant to the provisions of the Health Professions Procedural Code which is Schedule 2 to the *Regulated Health Professions Act, 1991*, Statutes of Ontario, 1991, Chapter 18 (“Code”) respecting one **DR. RICARDO SOLIS**, of the City of Haliburton in the Province of Ontario;

**AND IN THE MATTER OF** the *Dentistry Act* and Ontario Regulation 853, Regulations of Ontario, 1993, as amended (“Dentistry Act Regulation”).

Members in Attendance:     Dr. Richard Hunter, Chair  
    Dr. William Coyne  
    Dr. Peter Delean  
    Mr. Ram Chopra

**BETWEEN:**

**ROYAL COLLEGE OF DENTAL  
SURGEONS OF ONTARIO**

)   Appearances:  
 )  
 )   Ms. Luisa Ritacca  
 )   Independent Counsel for the  
 )   Discipline Committee of the Royal  
 )   College of Dental Surgeons of Ontario

- and -

)  
 )   Ms. Christine Mainville  
 )   for the Royal College of Dental  
 )   Surgeons of Ontario

**DR. RICARDO SOLIS**

)   Mr. Matthew Wilton  
 )   for Dr. Ricardo Solis

Penalty and Costs Hearing held on May 23, 2019.

**DECISION AND REASONS FOR DECISION PENALTY AND COSTS**

This matter came on for a hearing before a panel of the Discipline Committee (the “Panel”) at the Royal College of Dental Surgeons of Ontario (the “College”) in Toronto on July 20, 2018 and proceed for nineteen days over the course of several months.

On January 24, 2019, the Panel released its decision on liability. In it, the Panel found that the Member engaged in professional misconduct in a number of different ways, including the Member contravened a standard of practice or failed to maintain the standards of practice of the profession relative to one or more patients, contrary to paragraph 1 of Section 2 of the Dentistry Act Regulation. He recommended and/or provided an unnecessary dental service relative to one or more patients, contrary to paragraph 6 of Section 2 of the Dentistry Act Regulation. He signed or issued a certificate, report or similar document that he knew or ought to have known contained a false, misleading or improper statement relative to one or more patients, contrary to paragraph 28 of Section 2 of the Dentistry Act Regulation. He charged a fee that was excessive or unreasonable in relation to the service performed relative to one or more patients, contrary to paragraph 31 of section 2 of the Dentistry Act Regulation. He submitted an account or charge for dental services that he knew or ought to have known was false or misleading relative to one or more patients, contrary to paragraph 33 of Section 2 of the Dentistry Regulation Act. He accepted an amount in full payment of an account or charge, that was less than the full amount of the account or charge submitted by him to a third party payer, without making reasonable efforts to collect the balance from the patient, or to obtain the written consent of the third party payer, relative to one or more patient, contrary to paragraph 34 of Section 2 of the Dentistry Act Regulation, and he engaged in conduct or performed an act or acts that, having regard to all the circumstances, would reasonably be regarded by members as disgraceful, dishonourable, unprofessional or unethical, contrary to paragraph 59 of Section 2 of the Dentistry Act Regulation.

Following the release of our decision, the parties re-attended before the Panel to make submissions with respect to penalty and costs.

At the outset of the penalty and costs hearing, the Panel was advised that the parties had reached an agreement on penalty and costs. As such, this phase of the hearing proceeded on an uncontested basis.

### **Joint Submission on Penalty**

A joint submission with respect to penalty and costs was filed. The College and the Member submitted that the panel make an order:

- (a) requiring the Member to appear before the panel of the Discipline Committee to be reprimanded within ninety (90) days of this Order becoming final or on a date fixed by the Registrar;
- (b) directing the Registrar to suspend the Member’s certificate of registration for a period of twelve (12) months, to be served consecutively, such suspension to commence within thirty (30) days of this Order becoming final;



- (c) that the Registrar impose the following terms, conditions and limitations on the Member's certificate of registration (the "Suspension Conditions"), which conditions shall continue until the suspension of the Member's certificate of registration as referred to in subparagraph 1(b) above has been fully served, namely:
- (i) while the Member's certificate of registration is under suspension, the Member shall immediately inform the following people about the suspension:
    - a. staff in the offices or practices in which the Member works, including other regulated professionals and administrative staff
    - b. dentists with whom the Member works, whether the Member is a principal in the practice or otherwise associated with the practice
    - c. dentists or other individuals who routinely refer patients to the Member
    - d. faculty members at Faculties of Dentistry, if the Member is affiliated with the Faculty in an academic or professional capacity
    - e. owners of a practice or office in which the Member works
    - f. patients who ask to book an appointment during the suspension, or whose previously booked appointment has been rescheduled due to the suspension. The Member may assign administrative staff to inform patients about the suspension. All communications with patients must be truthful and honest;
  - (ii) while suspended, the Member must not engage in the practice of dentistry, including but not limited to:
    - a. acting in any manner that suggests the Member is entitled to practice dentistry. This includes communicating diagnoses or offering clinical advice in social settings. The Member must ensure that administrative or office staff do not suggest to patients in any way that the Member is entitled to engage in the practice of dentistry
    - b. giving orders or standing orders to dental hygienists
    - c. supervising work performed by others
    - d. working in the capacity of a dental assistant or performing laboratory work
    - e. acting as a clinical instructor;
  - (iii) while suspended, the Member must not be present in offices or practices where the Member works when patients are present, except for emergencies that do not involve patients. The Member must immediately advise the Registrar in writing about any such emergencies;
  - (iv) while suspended, the Member must not benefit or profit, directly or indirectly from the practice of dentistry.
    - a. The Member may arrange for another dentist to take over their practice during the suspension period. If another dentist assumes the practice, all of the billings of the practice during the suspension period belong to that dentist. The Member may be reimbursed for actual out-of-pocket expenses incurred in respect of the practice during the suspension period.
    - b. The Member is permitted to sign and/or submit insurance claims for work that was completed prior to the suspension.
    - c. The Member must not sign insurance claims for work that has been completed by others during the suspension period;

- (v) the Member shall cooperate with any office monitoring which the Registrar feels is needed to ensure that the Member has complied with the Suspension Conditions. The Member must provide the College with access to any records associated with the practice that the College may require to verify that the Member has not engaged in the practice of dentistry or profited during the suspension; and
  - (vi) the Suspension Conditions imposed by virtue of subparagraphs 1(c)(i)-(v) above shall be removed at the end of the period that the Member's certificate of registration is suspended.
- (d) directing that the Registrar also impose the following additional terms, conditions and limitations on the Member's Certificate of Registration (the "Practice Conditions"), namely:
- (i) requiring that the Member successfully complete, at his own expense, a one-on-one course in the College's Guidelines in Dental Recordkeeping (including the retention of records), Financial Recordkeeping, the Healing Arts Radiation Protection Act, the ALARA principle, and the justification for prescribing radiographs and interpretation, approved by the College, and provide proof of successful completion in writing to the Registrar within twelve (12) months of this Order becoming final;
  - (ii) requiring that the Member successfully complete, at his own expense, the ProBE Program on Professional/Problem-Based Ethics, to be completed with an "unconditional pass" within twelve (12) months of this Order becoming final;
  - (iii) the Member's practice shall be monitored by the College by means of office visit(s) by a representative or representatives of the College at such time or times as the College may determine with advance notice to the Member, during the period commencing with the date of the finalization of this Order and ending twenty-four (24) months from the College receiving proof of the Member's successful completion of the course(s) referred to above, or until the Inquiries, Complaints and Reports Committee is satisfied that the Member has successfully completed the monitoring program, whichever date is later;
  - (iv) that the Member shall cooperate with the College during the office visit(s) and further, shall pay to the College in respect of the costs of monitoring, the amount of \$1,000.00 per office visit, such amount to be paid immediately after completion of each of the office visit(s);
  - (v) that the representative or representatives of the College shall report the results of those office visit(s) to the Inquiries, Complaints and Reports Committee of the College and the Inquiries, Complaints and Reports Committee may, if deemed warranted, take such action as it considers appropriate;
  - (vi) the Practice Conditions imposed by virtue of subparagraphs (1)(d)(i)-(ii) above shall be removed from the Member's certificate of registration upon receipt by the College of confirmation in writing acceptable to the Registrar that the courses described in subparagraphs (1)(d)(i)-(ii) above have been completed successfully;
  - (vii) the Practice Condition imposed by virtue of subparagraph (1) (d)(iii) above shall be removed from the Member's certificate of registration twenty-four (24) months following receipt by the College of confirmation in writing acceptable to the Registrar that the requirements set out in subparagraphs (1)(d)(i)-(ii) above have been completed successfully, or upon receipt of written confirmation from the

Inquiries, Complaints and Reports Committee that the Member has successfully completed the monitoring program, whichever date is later.

- (e) that the member pay costs to the College in the amount of \$200,000.00 in respect of this discipline hearing, such costs to be paid in full by September 1, 2019.

### **Decision**

In regard to the finding that the Member committed professional misconduct, the Panel orders as follows:

- (a) The Member is required to appear before the panel of the Discipline Committee to be reprimanded within ninety (90) days of this Order becoming final or on a date fixed by the Registrar;
- (b) The Registrar is directed to suspend the Member's certificate of registration for a period of twelve (12) months, to be served consecutively, such suspension to commence within thirty (30) days of this Order becoming final;
- (c) The Registrar is to impose the following terms, conditions and limitations on the Member's certificate of registration (the "Suspension Conditions"), which conditions shall continue until the suspension of the Member's certificate of registration as referred to in subparagraph 1(b) above has been fully served, namely:
  - (i) while the Member's certificate of registration is under suspension, the Member shall immediately inform the following people about the suspension:
    - a. staff in the offices or practices in which the Member works, including other regulated professionals and administrative staff
    - b. dentists with whom the Member works, whether the Member is a principal in the practice or otherwise associated with the practice
    - c. dentists or other individuals who routinely refer patients to the Member
    - d. faculty members at Faculties of Dentistry, if the Member is affiliated with the Faculty in an academic or professional capacity
    - e. owners of a practice or office in which the Member works
    - f. patients who ask to book an appointment during the suspension, or whose previously booked appointment has been rescheduled due to the suspension. The Member may assign administrative staff to inform patients about the suspension. All communications with patients must be truthful and honest;
  - (ii) while suspended, the Member must not engage in the practice of dentistry, including but not limited to:

- a. acting in any manner that suggests the Member is entitled to practice dentistry. This includes communicating diagnoses or offering clinical advice in social settings. The Member must ensure that administrative or office staff do not suggest to patients in any way that the Member is entitled to engage in the practice of dentistry
  - b. giving orders or standing orders to dental hygienists
  - c. supervising work performed by others
  - d. working in the capacity of a dental assistant or performing laboratory work
  - e. acting as a clinical instructor;
- (iii) while suspended, the Member must not be present in offices or practices where the Member works when patients are present, except for emergencies that do not involve patients. The Member must immediately advise the Registrar in writing about any such emergencies;
- (iv) while suspended, the Member must not benefit or profit, directly or indirectly from the practice of dentistry.
  - a. The Member may arrange for another dentist to take over their practice during the suspension period. If another dentist assumes the practice, all of the billings of the practice during the suspension period belong to that dentist. The Member may be reimbursed for actual out-of-pocket expenses incurred in respect of the practice during the suspension period.
  - b. The Member is permitted to sign and/or submit insurance claims for work that was completed prior to the suspension.
  - c. The Member must not sign insurance claims for work that has been completed by others during the suspension period;
- (v) the Member shall cooperate with any office monitoring which the Registrar feels is needed to ensure that the Member has complied with the Suspension Conditions. The Member must provide the College with access to any records associated with the practice that the College may require to verify that the Member has not engaged in the practice of dentistry or profited during the suspension; and
- (vi) the Suspension Conditions imposed by virtue of subparagraphs 1(c)(i)-(v) above shall be removed at the end of the period that the Member's certificate of registration is suspended.
- (d) directing that the Registrar also impose the following additional terms, conditions and limitations on the Member's Certificate of Registration (the "Practice Conditions"), namely:
  - (viii) requiring that the Member successfully complete, at his own expense, a one-on-one course in the College's Guidelines in Dental Recordkeeping

(including the retention of records), Financial Recordkeeping, the Healing Arts Radiation Protection Act, the ALARA principle, and the justification for prescribing radiographs and interpretation, approved by the College, and provide proof of successful completion in writing to the Registrar within twelve (12) months of this Order becoming final;

- (ix) requiring that the Member successfully complete, at his own expense, the ProBE Program on Professional/Problem-Based Ethics, to be completed with an “unconditional pass” within twelve (12) months of this Order becoming final;
  - (x) the Member’s practice shall be monitored by the College by means of office visit(s) by a representative or representatives of the College at such time or times as the College may determine with advance notice to the Member, during the period commencing with the date of the finalization of this Order and ending twenty-four (24) months from the College receiving proof of the Member’s successful completion of the course(s) referred to above, or until the Inquiries, Complaints and Reports Committee is satisfied that the Member has successfully completed the monitoring program, whichever date is later;
  - (xi) that the Member shall cooperate with the College during the office visit(s) and further, shall pay to the College in respect of the costs of monitoring, the amount of \$1,000.00 per office visit, such amount to be paid immediately after completion of each of the office visit(s);
  - (xii) that the representative or representatives of the College shall report the results of those office visit(s) to the Inquiries, Complaints and Reports Committee of the College and the Inquiries, Complaints and Reports Committee may, if deemed warranted, take such action as it considers appropriate;
  - (xiii) the Practice Conditions imposed by virtue of subparagraphs (1)(d)(i)-(ii) above shall be removed from the Member's certificate of registration upon receipt by the College of confirmation in writing acceptable to the Registrar that the courses described in subparagraphs (1)(d)(i)-(ii) above have been completed successfully;
  - (xiv) the Practice Condition imposed by virtue of subparagraph (1) (d)(iii) above shall be removed from the Member's certificate of registration twenty-four (24) months following receipt by the College of confirmation in writing acceptable to the Registrar that the requirements set out in subparagraphs (1)(d)(i)-(ii) above have been completed successfully, or upon receipt of written confirmation from the Inquiries, Complaints and Reports Committee that the Member has successfully completed the monitoring program, whichever date is later.
- (e) that the member pay costs to the College in the amount of \$200,000.00 in respect of this discipline hearing, such costs to be paid in full by September 1, 2019.

## **Reasons**

The Panel concluded that the proposed penalty was appropriate in all the circumstances of this case. It therefore accepted the Joint Submission and ordered that its terms be implemented.

The Panel was satisfied that a reprimand and 12-month suspension, which will be made public on the College's register will act as both a specific and general deterrent. It sends a clear message to all members of the profession that the College will not tolerate members performing unnecessary dental services, submitting false, excessive or unreasonable claims and failing regularly to collect co-payments.

The imposition of the terms, limits and conditions will help protect the public. While under suspension, Dr Solis must not engage in the practice of dentistry. Prior to and upon his return to the practice, he is required to take courses in Radiation Protection, Recordkeeping and Ethics. In addition, once he returns to practice, the Member's office will be monitored for 24 months to ensure that he is meeting professional standards.

Rehabilitation of the Member is met by the successful completion of the mandated courses and the office monitoring.

When considering the appropriateness of the penalty, the Panel considered penalties ordered from previous disciplinary hearings and both aggravating and mitigating factors. The Panel was satisfied that the Joint Submission was fair and reasonable.

Aggravating factors include the several years in which the misconduct persisted. As well, the deliberate pattern of the Member's misconduct and the fact the misconduct was committed for the Member's financial benefit added to the aggravating factors present. The level of dishonesty was substantial and Dr. Solis's misconduct was strongly related to inadequate and possibly harmful patient care.

The fact that this was the first appearance of the Member before the Discipline Committee and that he agreed to the proposed penalty by way of a joint submission were considered by the Panel as mitigating factors.

The College's costs were substantial mainly due to the length of the hearing. The large volume of documentary evidence and the number of witnesses also contributed to the significant costs to conduct the hearing. As a result, the Panel accepted \$200,000 as appropriate. This represented approximately one third of the College's costs.

**Reprimand**


At the conclusion of the hearing, the Member confirmed his decision to waive his right to appeal. The panel delivered its reprimand immediately following the announcement of its decision on penalty. A transcript of the reprimand is reproduced at Schedule A.

I, Dr. Richard Hunter, sign these Reasons for Penalty and Costs as Chairperson of this Discipline Panel and on behalf of the majority of the Panel Members.



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Chairperson, Dr. Richard Hunter



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Date

## **SCHEDULE A**

### **REPRIMAND**

Dr. Solis, as you know, this Discipline panel has ordered you to be given an oral reprimand as part of the sanction imposed upon you. The reprimand should impress upon you the seriousness of your misconduct.

The fact that you have received this reprimand will be part of the public portion of the Register and, as such, part of your record with the College.

You will be given an opportunity to make a statement at the end of the reprimand if you wish.

The panel has found that you have engaged in multiple acts of professional misconduct. You contravened a standard of practice or failed to maintain the standards of practice of the profession relative to one or more patients. You recommended and/or provided unnecessary dental services relative to one or more patients. You signed or issued a certificate that you knew or ought to have known contained a false, misleading or improper statement relative to one or more patients. You charged a fee that was excessive or unreasonable in relation to the service performed relative to one or more patients. You engaged in conduct or performed an act or acts that, having regard to all the circumstances would reasonably be regarded by members as disgraceful, dishonourable, unprofessional or unethical.

Your professional misconduct is a matter of profound concern. It is completely unacceptable to your fellow dentists and to the public. You have brought discredit to the entire profession and to yourself. Public confidence in this profession has been put in jeopardy.

Of special concern to us is the fact that the professional misconduct in which you engaged has involved 14 charts that were missing or incomplete. As you know, three of us on this panel are dentists and understand that our records may be incomplete from time to time, but find it incomprehensible that one-third of your requested records were either missing or deficient. We found that you or your staff exposed patients to x-rays that were unnecessary. Although we can't quantify any harm that may come to your patients, we know that exposure to excessive ionizing radiation is detrimental to patients' wellbeing.

The panel is extremely disappointed that you fell into the habit of allowing billing for treatment not performed for your own financial benefit. This erodes public confidence in the profession which affects all of us.

As I advised earlier, you will now be given an opportunity to make a comment if you wish to do so. This is not an opportunity for you to debate the merits of the correctness of the decisions we have made.

Thank you for attending today. We are adjourned.