GROWTH CONTINUES—THE FIRST QUARTER 2016 DENTAL DOW:
Continuing the trend of growth from last year, practice Production is up 6.1% and Collections are up 6% compared to the first quarter of 2015 for the mature area practices sampled. Patient Flow was up 3.9%. New Patients were up about 2.7% (they were up about 7% in 2015).

The highest Doctor Production per Hour in our Dental Dow sample is $1,484. The highest Hygiene Production per Hour is $213. The Average Doctor Production per Hour is $652. The Average Hygiene Production per Hour is $151. Again, keep in mind that this is a group of mature practices and a mix of Metro and Outstate locations as well.

EVERYONE ON YOUR TEAM HAS TO DEAL WITH PATIENTS, MONEY AND INSURANCE. MAKE SURE THEY KNOW HOW!

A FRESH APPROACH TO COLLECTIONS.
COLLECTIONS MADE COMFORTABLE
THE TEAM APPROACH

Presented by: Shelly Ryan

Friday, November 4, 8:30 am to 12:30 pm
Embassy Suites Bloomington, MN

This perennial favorite is a must for you and your team. Dealing with patients, money and insurance is something you have to do every day so why not do it well? And, it takes the whole team!

Take the confusion out of dental fees and insurance so your patients follow through on treatment and your schedule stays full.

This seminar is almost always a sellout. As clients, you get first dibs and a discount! $198 first person and $178 each additional. Register by May 15th and receive $40 off per attendee. So CALL TODAY (952-921-3360) to reserve your space before we do our general mailing.

ASPEN'S ABOUNDING!
There are now 12 Aspen Dental offices in our state, one in North Dakota, a couple in Wisconsin and one in Iowa (there are over 500 nationally). They’re actively seeking Dentists in almost all of their Minnesota locations.

An Aspen Dental opened up in Bemidji in 2015. My clients there say that it’s been closed for some months now presumably because their previous Doctor(s) departed. They are searching for another one now. For a little schadenfreude, Google “Aspen Dental Reviews.” As far as I know, they are the most maligned dental entity on the Web. Even so, they must have lots of money behind them because they keep adding clinics.

I just heard of a recent case in which a young Minnesota Doctor bought a practice and then found, probably to his chagrin, that a brand new Aspen Dental was being built across the street. He’s not a client of mine but if he was, I’d tell him, “Fear not!”

I like to use Aspen Dental as an example of what the independent private practice doesn’t want to be. Yes, they’re shiny on the outside. They cover lots of hours and carry lots of PPO’s. They can’t be ignored. They are a competitive force. However, the lawsuit cited by the ADA last year in New York, where they were sued for $450,000, says what the core of their problems is. The company was run by the “Suits” not the Doctors.

Now I’m a “Suit” myself but I like the idea that the Doctors get the final decision on what clinical
treatment happens with their patients. Doctors do too and that’s one of the reasons why the larger group practice models (“Corporate Dentistry” or “DSOs”) tend to have greater turnover of both Doctors and staff than the private practitioner.

An obvious point here is if you have good staff you want to take good care of them! After the great recession, many practices did not award wage increases for a year or two - some longer. That’s changed now as the market heats up for assistants, front desk people and hygienists. Don’t take your staff for granted!

Of course, you don’t take your patients for granted either. People repeat experiences that either feel good or make them feel good. Since most dental visits don’t actually feel good, you want to make sure the patient feels good about themselves when they leave your office. That means really listening to them. Sincere compliments. Sure, you have to tell them if they need to floss more or get this or that done, but you can have them leaving feeling good about the stuff they are doing right and, most of all, that they were smart to get on in and get their checkup (or whatever). Of course, I don’t mean this in a patronizing way. For example, patients that commit to perio treatment are going through some inconvenience and expense and should be really congratulated for their efforts.

“Joe, I know getting here for these treatments can be a hassle, but you’re doing the smart thing. We see many people that wish they had done what you’re doing years ago—saving a lot of trouble. So, good for you for taking good care of your smile.”

Show Off Your Quality a Little: Ask your staff to constantly deliver the message that, “Dr. Goodguy does dentistry that looks good, feels good and lasts long.” Or phrases like, “Dr. Goodguy only uses the finest materials and your fillings (crowns or whatever) will last a long time if you take good care of them…” “Dr. Goodguy really stands behind his work. If there is anything more we can do for you, be sure to let me know. Here’s my card, just call…”

Of course, you already know that this should be getting done, but is it? If having a bright shiny Aspen Dental across the way stimulates you and your staff to take these extra steps to reinforce the value of what you do, the kind of practice you are, well then, Aspen Dental might actually do some good!

YOUR FIXER—TURNOVER INSURANCE:

Doctors, when you hire a hygienist or assistant, they’re right under your nose. For the most part you can see their work and know if they’re “on the job.”

Not so much so for the front desk team. It’s hard for Doctors to have the time, much less the knowledge, to know that all the bases are covered at the front desk. Are the insurance forms and bills getting out on a timely basis? Is the Recall System organized? Is there treatment follow up on patients that didn’t previously schedule? How is the front desk person handling the phones with new patients (or anyone)? Are they doing all that can be done to keep your patients happy and your schedule full?

Let’s face it, most of you don’t have the time or inclination to really stick your nose into the practice management software and see what’s going on. Even well-meaning, experienced front desk people can be dropping the ball without knowing they’re dropping the ball. You don’t want your office systems to break down due to turnover.

That’s where Heidi Benson comes in. Heidi is our new addition but she is certainly not new to dentistry. For over 20 years, she’s been a Dentrix trainer and she’s familiar with most all dental software including: Eaglesoft and Open Dental.

So, if you have turnover, call us and Heidi will come to your office for a “Systems Check Through.” If your front desk person is doing all that should be done, you’ll have the peace of mind of knowing it. If there are areas that are slipping, Heidi will nicely offer any relevant advice. Heidi is not a threat to your new front desk people…she can be their strongest ally. We want your front desk people to be happy and you to be happy with them. You’ll have busier schedules and a better bottom line (plus peace of mind knowing it’s all under control).

So, if you’ve had turnover in the last few months and/or want your administrative staff to get a one-on-one tune up, call me. We will get it done!
THE MDA CONVENTION IS COMING –
DON’T KEEP US A SECRET:

Your good words are still our single best source of new clients. Please don’t keep us a secret. When you see colleagues who tell you their practice is “stalled”, tell them to call us. We’ll make sure they’ll thank you for the suggestion.

YOUR STATISTICIAN:

Ever wonder about the effect of evening hours on a practice in attracting new patients? How about Friday afternoons? How important are Google Reviews to bringing in new patients really? Do practices with higher PPO participation really get more new patients than those with more mid-range or low participation? What are the properties of practices that attract more than average new patients and those that attract fewer?

We monitor over $30 Million dollars’ worth of dental activity per month in over 220 offices with over 300 Dentists represented. That’s a lot of data to sift through but I’ve found the guy who can do it!

I brought on Anantha Santhanam. He did analysis work for the Mayo Clinic and is attending the Carlson School of Management. Now he is working for you because everyone on my team is on your team.

In our consulting meetings this year we will be bringing you up to date on this research.

This is another example of how you, as an Independent Practitioner, get top notch management support from us.

STATISTICAL SNAPSHOT:

Production per Exam (from our APM Database):
This is a measurement of the range and depth of dental services accepted and delivered.

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WHAT WOULD UNCLE DICK DO?

My Uncle Dick is the reason I’m in Dental Practice Management. After college, I was looking into Medical Practice Management when my Uncle Dick (who practiced Dentistry in Rochester, MN for over 30 years) said, “Hey, check out Dental.” From that tip, I ended up working for the Professional Economics Bureau in 1980 and eventually became their Vice President. Then I started Advanced Practice Management in 1990.

My Uncle Dick really loved Dentistry. He was once President of the MDA in 1979 and very active in Continuing Ed. He was one of the early “Pankey Guys.” He also did missionary work in Madagascar and has been an ambassador for Dentistry in other places like China and Cuba.

When I’m running a meeting and coaching dental offices, I often imagine my Uncle Dick is sitting in. Would he be proud of what I am doing?

Dentistry has gotten a lot more competitive and certainly more business-like than in my Uncle’s day. I’m sure Uncle Dick would wince at the huge signs you see in dental offices now (in his day, signs couldn’t be lit and they couldn’t be more than 3 inches high) but he’d sure understand battling with insurance. He dropped participation with Delta Dental around the time he was MDA President.

He’s a big reason why “Clinical Calibration” is at the core of our ethical approach to patient education and case acceptance. It’s about “Criteria” not “Quotas.” We know that different Doctors have different clinical protocols, but, if their team is effectively presenting dentistry that’s true to their own inner laws, then we can all sleep well at night.

Uncle Dick is still alive and well at the age of 91. He lives with his wife, my Aunt Pat, in Sun City, Arizona, but he has been “attending” meetings with me for the past 35 years.

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TO US, YOU ARE THE BIG GUYS!

Professional Management for the Independent Dentist.