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Exclusively to Clients and Friends
of Advanced Practice Management

BULLETIN



Bill Rossi

DENTAL DOW First Half 2026

Practice Production was up 4% and Collections were up 4.5% over the first half of 2025 averages. Total Patient flow was up 1%, although new patients were down 2%. Crown and Bridge was up 8.6%. The overall production per exam was up 3%. Doctor hourly productivity increased 10%, hygiene hourly productivity was up 3%. Overall these are stronger numbers than the first half of 2025 compared to 2024, when production was up 2.8% and collections were up 2.2%.



Matt Lahn

THE CHART SALE The Best Deal in Dentistry!

There are times when an older Dentist is ready to retire, their lease is coming up, their equipment is old and they are not looking to have someone take over their practice. Still, they want to provide for their patients' care and get some value back from the practice they spent years building. Thus, a "Chart Sale."



Wendy Nelson

The Dentist and buyer usually agree on a price per record, and in our area that ranges from \$200-\$400. The seller sends a letter out introducing his/her patients to the buyer letting them know that the buyer has their records and will be providing for their care going forward if they wish. After a downpayment, the total paid will be based on the number of patients that show up within 2 years. So there is very little risk to the buyer, and usually 80% of the patients will transfer to the new practice.

One of the greatest advantages of acquiring the patients from an established practice is inheriting the trust and goodwill the previous doctor built over many years. This can significantly enhance both productivity and profitability. These patients are often older, may have more comprehensive treatment needs, and when provided with exceptional care, are likely to remain loyal to the new doctor—just as they were to the previous one.

What's Inside?

- Dental Dow - First Half 2026
- The Chart Sale: The Best Deal in Dentistry!
- Unproductive Hygiene—The Real Value of a Dental Hygienist
- Do You Have a Lot of PPOs? - Good!
- What's More Important? - Understanding Your Patients? Understanding Your Team? Or, Helping Your Team Understand You?
- Register for our 2026 Annual Fee & Wage Survey

The seller then does not have to worry about the custody of the records, and having to dig up charts while they are on vacation somewhere. The patients appreciate having some direction of where to go and continuity in care. It is a Win-Win-Win.

APM Practice Transitions facilitates these chart sales from time to time. Of course, we can't predict when the opportunity will arise. However, if you might be interested in this, please let us know and we will keep you informed if we have something that comes up in your area.



Brooke Ackerman

"UNPRODUCTIVE HYGIENE" The Real Value of a Dental Hygienist:

As consultants, dentists, office managers and hygienists, it's easy to become focused on the metrics because they're easy to measure; production per hour, periodontal percentages, fluoride acceptance, treatment acceptance, reappointment rates, etc.

But after working with practices across the Midwest, I've realized something. The numbers tell us **what** happened. They rarely tell us **why**.

It's the hygienist who notices a nervous patient and slows the appointment down instead of rushing through it. It's the hygienist who asks probing questions to find the root cause of their anxiety and pivots to adjust their treatment to ease their anxiety. It's remembering to ask about a grandchild's graduation or following up on a patient's shoulder surgery from six months ago. It's the hygienist who takes time to comfort a recent widow, recognizing that dentistry is more than meeting metrics. It's the hygienist who helps an assistant who is overwhelmed, mentors a new team member, or steps in when the schedule unexpectedly falls apart.

It's the confidence they bring to co-diagnosis and the trust they've built with patients over years of consistent care.

We Believe In You!

We believe that Independent Private Practice is the best way to deliver dentistry. It is best for the patients, the doctors and the staff. Private practices can be more selective with their continuing education and technology. They can also be more adaptable and efficient. **Most importantly, the people who make decisions about patients' dental care are the ones in direct contact with them.** We also believe that professional management support helps **good practices be better** and thrive in a competitive environment.



I've visited practices where two hygienists had nearly identical production numbers, but one consistently had patients requesting to see her, referring family members, accepting recommended treatment, and leaving glowing online reviews. The reports made them look equally productive. The patient experience told a completely different story.

I've found many times patients have had a difficult time with anesthetic or simply dislike the noises produced by the cavitrone or high-speed handpiece. The point is: we don't know and can't help them unless we ask! A highly emotionally intelligent hygienist knows how to handle those situations and communicate with teammates. Patients who are truly listened to and understood feel valued.

None of those actions have a procedure code. Yet those moments are often what patients remember long after they leave the office.

DO YOU HAVE A LOT OF PPO'S? **GOOD!**

Maybe you're feeling knee deep in PPOs. So many that you can't keep track of them. Or you're in an umbrella PPO group, or even multiple umbrella groups. When you are that deep into it the discounts can be running well over a third of your daily production, maybe even 40%-50%. The PPO write-offs are probably your biggest "expense" – even bigger than wages. The good news is, having a lot of PPOs means you have a lot of opportunities to shed the discounts and bring more to your bottom line. In my world a practice that has a lot of PPOs has a lot of "targets."

Even dropping a small PPO can add handsomely to your bottom line. Example: Let us say a PPO is 10% of your practice and the practice is producing \$100,000 a month. The write-offs for this PPO are 40% so you're collecting \$6,000 on that production. With some preparation you drop the PPO. With this preparation you should be able to retain at least 60% of those patients, so it'd be a "break even," every patient retained becomes "golden" – full fee patients. They are there primarily because of you and your team, not because of your insurance participation. That's how you gradually grasp back control of your practice.

However, breaking even isn't the object of the game. You now have 4% of opened capacity. If your practice is healthy, that will fill back in. However, some of it will fill back in with the PPO patients that also have, let's say, 40% discounts. So, you'll collect \$2,400 a month or \$28,000 a year more on that 4 points of "replacement" production. In most cases this is close to an additional month's worth of net income, and that's just from picking off one PPO. Now that you have that PPO transition underneath your belt you can get onto the next one and gradually, you're adding to your income, not just for a year but for *years* to come. Plus, you have peace of mind that you're less controlled by insurance companies.

Doctors often are paralyzed about making decisions in dropping PPOs. It's so much easier to sign up for them than to drop them. The decision can seem risky. Your administrative staff may resist because they are worried about uncomfortable conversations with the patients (by the way it doesn't have to be that way). Yet, doctor, you've made bigger decisions. Remember when you started your practice, or bought your practice, or decided to join a practice? Or expand your facility? Dropping a PPO is a relatively minor decision that can deliver big rewards. (Call Bill Rossi 952-921-3360)

WHAT'S MORE IMPORTANT? **Understanding Your Patient? Understanding Your Team? Or, Helping Your Team Understand You?**

The answer is simple: **all three!**

That's exactly what the DiSC® personality assessment and team training brings to your practice.



Kimberly Radke



DiSC is a practical, easy-to-understand framework that identifies four primary behavioral styles. Rather than putting people into boxes, it helps you understand how individuals communicate, make decisions, respond to stress, and work with others. In a busy dental practice, that insight can make all the difference.



The true value of the DiSC goes beyond self-awareness. It creates mutual understanding—helping team members adapt their communication styles to work more effectively with one another while also connecting with patients in ways that build trust and confidence.

You can have exceptional clinical skills, efficient systems, and a beautiful office, but the practices that truly excel are the ones with teams that communicate well, collaborate effectively, and understand both each other and their patients.

DiSC provides one of the simplest and most effective ways to build that kind of culture.

Ready for a great team meeting? Contact Kimberly Radke today for a short phone call to see if DiSC is right for you.

REGISTER NOW TO PARTICIPATE IN OUR ANNUAL FEE & WAGE SURVEY

Invitations to our 46th Annual Fall Fee & Wage Survey (online) will be emailed to Dental offices in the **Midwest** region in early-September. Be sure you are registered! All participants will receive the results in late October (Confidential to Doctor).

Scan the QR Code



OR

Type the URL to your browser:

<https://advancedpracticemanagement.com/registration-fee-wage-survey/>

OR

You can contact us, and we will get you registered:

- Email: APM@AdvancedPracticeManagement.com
- Call: (952) 921-3360
- Contact us through our Website:

<https://advancedpracticemanagement.com/contact-us-2/>

