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Start of Something Good

By Jake Puhl

Local owners with local names on the door. It sounds like a down-to-earth business model, but it's led to out-of-this-world growth for Pacific Dental Services. “We partner with dentists who want to progress with the company and own a practice, then find the best real estate and locations and markets, sometimes years before that real estate becomes available,” Pacific Dental Services® Founder, President and CEO, Stephen E. Thorne, IV, recounts in this month's cover story. This model empowers supported dentists to grow their practice from the ground up with structured support from a network of clinicians. Utilizing this growth model since the beginning, PDS has helped to develop more than 800 successful practices to date.



The essence of the PDS business model is to enable clinicians to focus more on the patient and worry less about the business. PDS is de novo-based and grows that way. And the DSO is not alone. In this issue we explore the de novos approach – as well as other ways to grow – through the experiences of several successful dentist entrepreneurs:

In a roundtable on the topic, Drs. Matt Kathan, Eric Roman and Sam Alkhoury discuss setting up de novos with the DEO, as well as some best practices for establishing a dental brand. “De novos are your thing,” Dr. Alkhoury said. “It’s your fingerprints, your smell, your color; it’s you. If you’re a doctor who has a strong culture and believe in what you do, that office becomes you.”

Dee Fischer, CEO of Fischer Professional Group shares best practices on how to get started with de novos. “Starting a dental office is not easy, but it does not have to be impossible. When you approach your de novos with the right questions, preparation, and mindset, you will set yourself up for success.”

In “The House That Affiliations Built,” Dr. Samson Liu explains the process of building SOHDental through affiliations. “It was not an easy or smooth journey by any stretch of the imagination, but it allowed me to develop a dental brand that benefits the patient through unique, customer-focused treatments and approaches.”

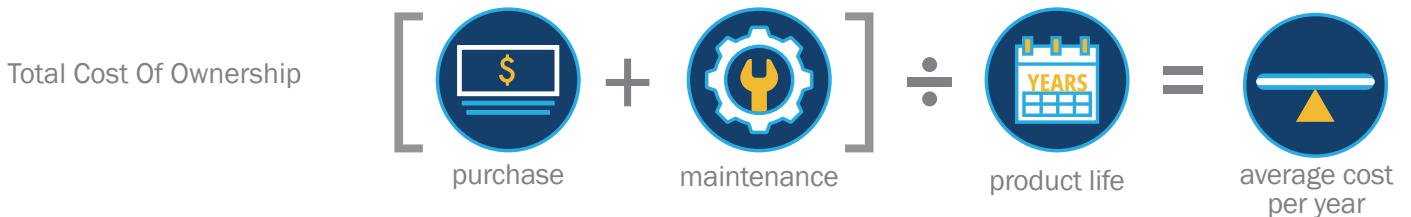
Finally, as of press time we were making final preparations for the DEO Fall Summit 2021, “Doubling Dental.” The event will be live and virtual, and feature industry thought leaders from some of the most successful dental service organization discussing growth, patient outcomes, revenue, profit, and more. You’ll find information for the Fall Summit at <https://deodentalgroup.com/summit-fall>. We hope to see you there!

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The Future of Dentistry

The case for expanded access to care : BY ANDREW SMITH, EXECUTIVE DIRECTOR OF THE ADSO

As we continue to push through these unprecedented times, it has become clear that there is a vital need to provide patients with expanded options. Meeting the demand for proper care, the health care industry developed innovative solutions to expand access to health, including virtual consultations. Salient issues ranging from dental shortages to the rise of teledentistry require dialogue and awareness to accomplish change. For the industry to progress, we must also note the importance of advocacy and oral health education.

One example of the ADSO’s role in awareness and education happened recently in North Carolina. On July 23, Governor Roy Cooper signed Senate Bill 146 into law, establishing the standards of teledentistry in the state. In addition to expanding the use of telemedicine, the legislation allows oral hygienists to administer local anesthetics while under the direct supervision of a licensed dentist, growing access to high-quality care to underserved urban and rural communities across North Carolina.

improvements in overall health and quality of life are also achieved.

This most recent win is an example of the ADSO’s commitment to elevating dentistry, as the Association advocates for policies that allow DSO-supported dentists to prioritize patient care. Conversations at the local level not only affect state policies, they eventually drive national standards of care. By having an open dialogue about the role of teledentistry at the community level, the ADSO communicated the public health benefits of dentists delivering virtual care when applicable. The combination of conversation and expertise led to progress, and the ADSO helped chart the path to address dental health shortages and access to treatment.

Looking ahead to the future of dentistry, the role of technology and advocating for oral health integration are just a couple of the futuristic topics that will be presented at Leading the Evolution of Dentistry, an ADSO members-only event that will take place in Las Vegas from October 13 to 15. The people most important to the ADSO – its members – will convene to chart the course for the industry. As the Association celebrates its recent accomplishments, it also looks to the future with a comprehensive plan for progress.

Until we reunite at Leading the Evolution of Dentistry, we look forward to advocating for and elevating dentistry one day at a time. ■

Looking at the whole picture, the ADSO recognizes that the mouth-body connection is critical to maintaining overall well-being. When progress is made for a patient’s access to care, improvements in overall health and quality of life are also achieved.



More than 2 million North Carolinians struggle to receive adequate dental care, and all 100 counties are considered partial or full HRSA-identified Dental Health Professional Shortage Areas. Looking at the whole picture, the ADSO recognizes that the mouth-body connection is critical to maintaining overall well-being. When progress is made for a patient’s access to care,

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Leading a Dental Brand in the Modern Age

Insights from clinician, to CEO, and now Chief Dental Officer : By Dr. Jeff Burg

I have a theory about the type of person that chooses to become a dentist. Growing up, these were kids who were good at navigating school and had a low risk tolerance, but also valued autonomy. They knew that if they worked hard and got good grades, they would wind up in a role where they could be successful.

Dentistry, however, isn't exactly a wellspring for creativity and that's perfectly fine for most dentists. Dentistry is largely a technical industry, filled with routines and processes that you repeat multiple times throughout your day. With pediatric dentistry, there are far fewer procedures to be done, which means that these routines and processes are even more exaggerated. There is not really a place for creativity when you are in the chair.

Fortunately, things are changing, especially in the dental group practice setting. Today, there are a few more entrepreneurial-minded individuals who wind up in a dentist chair with a natural penchant for taking risks and embracing their creativity.

From clinical to administrative

Some of these dentists may not even know that they are more of an entrepreneur type. Personally, I did not realize at first that the business side of dentistry would end up speaking to me more than the technicalities of patient care.

I opened Burg Children's Dentistry and Orthodontics in 2002 and over the last 20 years we have added



roughly one location a year. My role had transitioned from a doctor with a single practice to a CEO operating multiple practices. Over the last few years, we had gotten to the point of looking at the possibility of a partnership with a couple of different

organizations. We ended up partnering with a larger dental group called Specialty Dental Brands, a niche support organization focused on building a network of specialty dental practices.

Now, at Specialty Dental Brands, we offer a clear competitive advantage for our partners by combining the best providers and superior locations with exceptional business support. Specialty Dental Brands supports partners specifically in pediatric dentistry, orthodontics, and oral surgery. Our goal is to partner with dental brands that have hit their stride and know what they want to accomplish. Most of our doctors have a clear picture of what they are doing, and their offices have typically reached their full value or gotten as close as possible.

My own role has transitioned to the Chief Dental Officer for the organization. As such, I bridge the gap between the clinical and administrative sides for our partner office locations. Any group that is set up as a true DSO or multi-location practice is under a lot more pressure from a compliance standpoint regarding the separation of the clinical and administrative sides of the operation. I serve as the go-between for any changes or ideas that each side of the operation wants to bring to the table. As the liaison, it is my job to ensure that each side feels listened to and has what they need, while making sure that our doctors

have all of the autonomy they need to provide excellent patient care.

Leading a dental brand

In these three unique roles I have seen that now is the perfect time for entrepreneurs to go into dentistry. There is an outlet for dentists who are more interested in the nuts and bolts of running a business, rather than performing the routines of dentistry every day. These opportunities did not exist 20 to 30 years ago. In fact, most dentists are usually performing the role of CEO at their practice to begin with. So even if you did not jump into the industry with an entrepreneurial approach in mind, there's certainly a place for it in modern dental practices.

The transition of working with patients to performing administrative and executive tasks can be tricky. It is important to remember that delegation is a key part of the process. Invest in a team that is willing to take on new responsibilities and you will set yourself up for success down the road. For multi-location practices, the responsibilities of the CEO become more varied and spread out. Eventually, I ran out of time to practice in a chair. I made time to see patients when necessary, but I ultimately found that I needed to focus on the administrative side of things.

At the end of the day, it's all about managing the needs of your employees and the needs of your patients. For example, we had to find a way to work through the COVID-19 pandemic. It's a huge balancing act to make the "right" decision for everyone involved. Do your doctors want

to work in the office? Should they? Are your patients willing to come in person? While those were certainly extenuating circumstances that we hope are very temporary, it is a small piece of the larger effort to ensure that your doctors have what they need to effectively care for your patients.

Maintaining perspective in the details

Leadership requires a specific set of skills to be truly effective on a day-to-day basis. Making decisions as a leader requires you to be informed on all facets of your industry and your organization. More than anything, leaders need to maintain a healthy perspective on what really matters in the daily operations of your organization.

There will be plenty of days where things do not go as planned, but it's important to move past that and focus on what your organization believes in. Patient care should be your top priority. Everything else is just details to that end. While those details are important to the success of your practice, finding the right perspective is a healthy way to improve your patient outcomes.

For dentists that want to get involved in every minute detail of your practice's processes, it can be easy to get lost and overwhelmed in the little things. While you may want to make every minor decision about your processes, delegation is such a huge part of maintaining a healthy perspective. When you delegate those responsibilities to your team, you can focus on aligning the goals and vision of your practice to provide a better experience for your patients. ■



Jeff Burg grew up in the beautiful Pacific Northwest, near Seattle. After graduating from Brigham Young University in Utah, he attended Dental School back home at the University of Washington. He then continued his educational training in Pediatric Dentistry at the University of Texas - Houston Dental Branch. In 2002 Jeff took over a thriving pediatric dental practice from a great retiring dentist back in Utah. From 2002 to 2020, that practice grew to 21 locations and expanded into Orthodontics and General Dentistry, including a surgical center. Along the way, Jeff felt like he needed a bit more foundational business knowledge, so in 2014 he graduated from the University of Utah's Executive MBA program. In 2020, the practice partnered with Specialty Dental Brands, where Jeff now serves as the Chief Dental Officer.

Above and Beyond

BISCO is committed to providing solid, sound technical support for its customers.

Product innovation is important to improving the health of patients, but if clinicians aren't properly educated and trained on how to use those products, good clinical outcomes may not happen. That's why BISCO has made it a point of emphasis to have one of the industry's leading teams of clinicians and scientists to provide technical support for dentists.



“While I am certainly not a chemistry expert, I do understand that product chemistry is incredibly complex, and how one product functions with another is a crucial part of achieving a successful result,” said Illinois clinician Dr. Alan J. Acierno, who has been using BISCO products for nearly two decades. “When you really break down the restorative process and think of all of the steps and materials needed, it’s remarkable how important it is that all these products work in unison.”

BISCO has invested heavily in its customer service team members to provide support beyond the purchase, so clinicians can get the most out of the products they choose to use for their practice. “We believe that in order to provide the best support possible, our sales professionals must be trained adequately on not only our products, but also on our competitors,” said Rolando Nunez, DDS, MSc., Manager of Clinical Marketing. “We provide support to those who call us, regardless of the

product they use. We are available to troubleshoot issues or answer questions regarding our competitors. This builds a solid relationship with our customers, who see us as a valuable resource for problem-solving.”

One resource many practitioners have found particularly helpful is BISCO’s Ask the Expert team, where they can send their questions. Once the question is posted, it will be answered by someone capable of providing the proper response, which will depend on the level of complexity of the question. Anyone from the technical support area all the way to the Research and Development Department is involved in answering questions.

Indeed, BISCO’s team believes in providing all the pertinent information to customers regarding the proper use and application of BISCO’s products, as well as the science generated that supports the company’s claims. “This differentiates us from other companies,” said Nunez.

“The people at BISCO really care about their products and are extremely proud of them,” said Dr. Acierno, adding that the staff members are willing to get as technical or high level as needed to ensure customers get their questions answered. “Unlike other manufacturers, BISCO is not merely selling you a product—the reps are telling you exactly what the product does, and through that information, the product sells itself.” ■

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Using Marketing to Drive Productivity for Your Dental Practice

Engage your existing audience while reaching a new one. : By Alyssa Keefer



For a lot of business owners, marketing is merely seen as an expense.

Something that you can pour thousands of dollars into without the immediate results you think you should see. Marketing should be seen as an investment into the success and prosperity of your business. With a comprehensive marketing plan in place, your organization is prepared to engage your existing audience while reaching a new one.

Except for practicing dentistry, I have worked my way through every position in a dental office to understand the day-to-day operations of a dental practice. With this unique perspective, I understand the dynamic challenges and needs that dental practices face each day. I am a marketing manager for

dental groups across the United States and Canada, with one goal in mind: helping practices win with marketing initiatives.

The challenges facing dental practices

The perception that marketing is an unnecessary expense isn't exclusive to dentistry. In every industry, business owners are wary of the effectiveness of marketing campaigns. With dentistry, it can be even harder to connect with your audience without a marketing strategy. For example, many people are actively afraid of the dentist. Not having a marketing plan in place will only work to further perpetuate these fears.

On the other hand, you likely don't have the time to even think about what your marketing efforts look like. Many dentists are focused on nailing down the right PPE protocols for your team, improving patient safety, how to engage your team, and making sure that you have the finances to cover everything. One of the biggest marketing challenges dentists face is the perspective of the patient. Without a patient-first mindset in your approach to marketing, your messaging will lack empathy and understanding for the challenges your patients are facing.

You need to show your patients that you have the solutions they

need. If that means adjusting your hours on a weekday or even adding Saturdays to your schedule, that is the kind of approach that you might want to consider for your patients. Heavy self-promotion may not resonate with your audience, but sympathy and empathy certainly will.

How to focus your marketing efforts

Focusing your marketing efforts will not only give you a better picture of what works for your organization, but it will also help you to prepare future marketing campaigns to reach new patients. Here are some marketing focus areas that are crucial for any dental practice:

1. Messaging – Your messaging needs to accurately convey who you are and what you do for your patients. Authenticity is key, whether it’s through your mission statement, web copy, or even the imagery you use in promotional materials. It’s also important to recognize that what you have done in the past may not work anymore. COVID changed how we all perceive the world around us, and it’s important that your messaging reflects the new world climate. Additionally, you want your messaging to be cohesive across all your platforms: your website, social media accounts, emails, text messages, printed promotional materials, as well as voicemail and on-hold messages, which are most often forgotten. By updating your messaging to reflect things like COVID practices, you will show that you understand what your patients want and need right now.

2. Budget – Nearly 95% of dental practices recently reported that their patient collections were reduced by 75% or more during COVID-19. With less revenue to work with, your marketing efforts need to be more efficient than ever. Maximizing channels you already use like social media, email campaigns, and your website is vital to

what you are doing right now. Maintaining a marketing budget can be difficult, so it’s important to make smart, informed decisions on what you spend your marketing money on.

3. Goals and Expectations – Setting realistic goals and expectations is crucial for the success of any business, especially during a pandemic. You need to understand that you might not hit the same goals that you might have a couple of years ago, and that’s OK. Working smarter and understanding what you can accomplish is all part of the new normal. When it comes to measuring your marketing effectiveness now against the results of pre-pandemic business, there will be absolutely no way to compare. It’s still important to measure and track data, but you need to be realistic about setting new benchmarks and KPIs. They will likely be moving targets, so be patient and trust the process.

4. Marketing Agency – Marketing a dental brand can be tough, even with a full marketing team. Marketing tactics and trends are constantly changing, as organizations like yours are competing for the attention of customers every day. Even if you have a marketing team, you might want to consider hiring a marketing agency for your marketing support needs. A lot of my clients and the people I am close with are far too busy to even think about marketing efforts for their practices. It’s a good problem to have, but it’s also a problem that can be easily resolved by outsourcing your marketing needs. A marketing agency is equipped with the tools, resources, and people to find new ways to drive engagement and attract new patients to your dental brands. Partnering with an agency could even give you that edge you need on your competition. ■



Alyssa Keefer is Founder and MarTech Guru with Novateur Media & joyFULL People. She has over 10 years of extensive “hands-on” experience working through every position in a dental group, growing into executive leadership, and helping launch a dental group from \$0 to 40M in 5 years. Alyssa now coaches and consults dental groups on marketing, data analytics, operations, and more. Dental groups are empowered by her expertise and guidance to differentiate themselves through game-changing marketing and technology.

Marketing A New Location

A cross-channel strategy is the key to driving new patients to your dental office. : BY DR. RICHARD EVANGELISTA, CEO, DENTALFORCE



Internet users search for health-related topics second only to food and beverage. According to a survey by the Pew Internet & American Life Project, 80% of adult Internet users in the U.S. have searched online for at least one major health topic. That's an estimated 93 million Americans.

We live in a branding era. A business of any kind, including your dental office, must have a brand, and you have seconds to make an impact on a visitor to your website. All your marketing begins or ends right there – making the right or wrong impression in an instant. It is a quick and emotional decision in an informational world.

So, your website must include genuine, eye-catching images with

a clean and modern look. It's your first impression. Potential patients will feel a continuity with you if your website represents you well.

A holistic approach of a comprehensive digital marketing strategy begins with your website and connects the dots between your other digital channels. This hub-and-spoke, cross-channel strategy is the key to driving new patients to your dental office, appealing to

a younger audience and keeping up with your competition. There is no shortcut. Your team needs a real strategy, not SEO tricks.

Include simple, clear calls to action and bite-sized content on your website. Showcase your recognitions, awards and credentials as well as third-party validations. Your potential leads are on a journey. They will click on your website from an ad, mailing or directory. Then, they will check your social media accounts and your reviews. Finally, they will come back to your website and either convert or should be retargeted. They usually don't decide on their first visit to your website. You must reach them a second, third and fourth time, so your retargeting strategy must have the proper appeal.

Search is still king

There are many ways to market and build an online presence, but search is still king. Paid or organic search captures user intent and has the most impact. Your website must have the right information to be indexed in the right places for search engines. This includes knowledge about the dental services users are seeking. These users are further down the sales funnel and this gives your website a genuine, authentic and trustworthy feel.

Your organic social media feeds on Facebook, Instagram, Twitter and elsewhere help connect you with

your customers, especially younger ones. Posting regular content from your in-office staff is another method of validating your dental practice.

Also, through the proper messaging and cadence, email marketing can help keep current patients in the practice or win back past patients. But it's important to invest in your own email list, not one that's connected somewhere else, like to Facebook. Marry your data to it and understand what people are clicking on in your email campaigns. They must have value or otherwise you will lose subscribers.

Finally, old school mailings still have good value, but they must be coupled with a digital approach. Connect

them to social media ads in a targeted mailing area and retarget website visitors after they come to your website. It's a multi-touch process.

Most importantly, you must track where each of your digital channel visitors comes from, what they searched and what campaign was successful. Make sure it's well defined. A good marketing firm will frequently report back on your search engine rankings, top traffic sources, page load speeds, bounce rates, website traffic, leads, calls, conversions and new patient acquisitions.

Benchmark each lead acquisition, turn it into a return on investment and get five more patients from it. ■







Dr. Richard Evangelista is a dentist based in Fremont, Calif., and is the founder and CEO of Dentalforce, a dental management and growth consulting company educating, coaching and supporting dentists at each stage of their careers. Dr. Evangelista grew his own group practice from five locations and 30 employees to more than 40 locations and 400-plus employees in five years.



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The House That Affiliations Built

Integrating new practices into your brand requires you to develop foundational systems. : By Dr. Samson Liu, MAGD, MBA, MSF



When I started SOHDental in June of 2018, I had a vision to own three locations within the first year. Somehow, after 14 months, SOHDental had 27 locations! It was not an easy or smooth journey by any stretch of the imagination, but it allowed me to develop a dental brand that benefits the patient through unique, customer-focused treatments and approaches.

SOHDental was built through affiliations. Building a business by affiliation is a risky venture for any industry if not done successfully. Part of what we initially struggled with was learning the process of buying and integrating practices. How could we establish our brand if we weren't even able to master the art of acquiring practices? Therefore, we made a conscious decision that the only way to get good at something is to practice, practice, practice!

Repeat the same process over and over again and make mistakes early and often, but then always use our best effort to learn from those mistakes. Some people called this process CANI (Constant And Never-ending Improvement).

That is essentially what we did in the first year. In addition, we quickly realized that there is little-to-no bargaining power with only two or three locations, so we developed an ambitious aggregation

strategy. First year, first step is focus on the customer. As a support organization, our customer base is dental practices, doctors, and their teams. Our priority was to aggregate as many customers as possible in the first year, while refining the engine of SOHDental.

Next steps

In the second year, second step is worked on an operational efficiency strategy. We made mistakes in our process of buying a lot of practices over a short period of time, but we accelerated our learning curve significantly. Now with the operational efficiency strategy, we are working on perfecting the transitional period of the acquisitions



One of the biggest challenges with the acquisition approach is retaining the team after integration. We have a small transition team that is dedicated to making the integration as seamless as possible.

in order to get the new partners aligned with our mission and core values. SOHDental may not grow as quickly in the second year, but it's equally as important to focus on the operations of supporting our practices as it is to acquire more locations.

Integrating new practices into our brand requires us to develop the foundational systems of our dental brand. At this stage, there's no right or wrong answer! It's all about finding what works for our team and our supported patients. What are your processes going to look like for your company? What do you want to focus on? And most importantly, how do you want your company to operate?

Moving forward, we are working one step further removed from the customer. While first year was all about acquiring practices and second year was further developing our support services, the next steps are driving growth, productivity, and revenue in the dental practices.

Improving employee retention

One of the biggest challenges with the acquisition approach is retaining the team after integration. We have a small transition team that is dedicated to making the integration as seamless as possible. They stay on site for the week after the closing and circle back about once a month to ensure that our new partners have everything they need.

The best way to reduce team turnover is to reduce doctor turnover. If a doctor leaves soon after we acquire a new practice, that will likely cause a domino effect for the rest of the team. Once the doctor is replaced, it is likely a few additional people will be resistant to working with the new doctor, resulting in yet another wave of people leaving.

SOHDental has implemented a doctor engagement strategy that is designed to keep doctors interested and engaged with our mission and goals. One of the ways to keep doctors engaged is by giving them opportunities to grow and give back. We have a couple of doctors that travel and work but also train and mentor other doctors in the

company. In general, doctors in group supported practices have a lot more opportunities to grow and they have more access to various trainings that would encourage their professional and personal development. Training and education is a crucial part of any engagement strategy – not only is it important to keep doctors up to date on the latest trends and innovations in the field of dentistry, but it's also key to building that doctor culture critical to retention.

Finding the right partners

Acquisitions can be risky because you inherit both the good and bad from new partnerships. We learned the hard way that it is important to find a partner that is the right fit for your vision. SOHDental had a bit of an edge because I had my long-term support team with me initially; they understood the way I wanted to approach practices. I was fortunate to work with this support team in addition to leveraging my vast existing network of vendors, partners, and doctors in the industry. With these elements in place, we started off on a great foot to be successful. Yet even with our shared experience and determination to create something unique, we encountered plenty of obstacles along the way.

The best way to overcome some of these barriers is to recognize that not all practices are the same. Building a portfolio of practices means identifying and categorizing them appropriately. By grouping practices into several different tiers based on

Building a business by affiliation is a risky venture for any industry if not done successfully. Part of what we initially struggled with was learning the process of buying and integrating practices. How could we establish our brand if we weren't even able to master the art of acquiring practices? Therefore, we made a conscious decision that the only way to get good at something is to practice, practice, practice!

metrics such as revenue, self-sufficiency, and doctor preferences, we can better estimate the level of support they might need.

For example, Tier 1 practices have the highest revenue, a great doctor, and a great support team. They have perfected their processes and don't require a lot of support. Tier 2 practices are still successful but need some support and maintenance. In Tier 2 offices, we provide training for the doctor and the team to improve their daily processes. Tier 3 practices are high-risk dental practices that often have revenue of less than \$1 million. These offices usually have minimal infrastructure, a lean team where people perform multiple functions in the practice, and when there is turnover, the office no longer functions properly. However, these offices also have the highest growth potential and return with adequate support.

With these tiers in mind, my team and I can make better decisions about future partnerships with dental practices. For example, Tier 3 offices are optimal choices for purchase, but

that doesn't mean that Tier 1 offices should be ignored. The proper balance between the two is inherently dependent on your risk for appetite, availability of resources and desired growth rate. ■



Dr. Samson Liu is the founder and CEO of SOHDental LLC, a clinician owned, innovative and people focused dental partnership organization unique in the industry. Started in 2018, by the end of 2020, SOHDental supports over 35 practices in 8 states.

Prior to SOHDental he was a Senior Dental Executive with 18 years of experience in leading clinical and support services at Heartland Dental from 13 to 800 locations, a ~\$1.3 billion Dental Support Organization (DSO).

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Best Practices in De Novos

Experts share their insights and experiences from building successful dental group practices via de novos.

De novos are a lucrative way for dentists to literally build their brands from the ground up. In this roundtable, several leaders in dentistry discuss setting up de novos practices with the DEO, as well as some best practices for establishing a dental brand.



Dr. Matt Kathan – Matt is the CEO of Timber Dental, a group practice that lives up to its tagline, “Family dentistry done differently,” by being open evenings and weekends to cater to busy young families and professionals. Matt brings years of clinical directorship and superior leadership skills to growing his DSO.



Dr. Eric Roman – Eric is the executive coach and strategic advisor for DSO leaders, high performing dentists, and dental software companies through dsocoach.com. With his experience as the former CEO and co-founder of Carolina’s Dentist, Eric is able to deliver uncommon insight from DSO inception through exit. His true passion is helping leaders accelerate life satisfaction, impact, and sustainable team culture.



Dr. Sam Alkhoury – Sam is the president and founder of Simply Dental Management. Their main DSO mission is providing compassionate care to their patients of over 35 practices across New England. Simply Dental Management has successfully retained an excellent reputation while growing at an impressive rate due to their commitment to the four core values including honesty, integrity, sincerity, and teamwork.

DEO: What’s the case for de novos?

Dr. Sam Alkhoury: De novos are your thing. It’s your fingerprints, your smell, your color; it’s you. If you’re a doctor who has a strong culture and believe in what you do, that office becomes you.

Dr. Eric Roman: I know we talk about culture a ton and overuse it, but we wanted to create a unique culture inside of our business. I knew that if I was acquiring practices, that wouldn’t happen. Transitioning cultures can be painful and expensive. The cool thing about

our practices is that we were able to start from the ground up and establish who we are from day one. That’s given our company a platform to go out into the market and do acquisitions because we know who we are. That’s our reason for doing de novos.

It was also a huge market opportunity for us. We were in a market where we knew we wanted to be branded because there wasn’t a large number of branded practices. It was cheaper for us to acquire patients than buy them. You have to sit down and look at your market and your strategy to decide if this is the right path for you. Because it isn’t easy.

Dr. Matt Kathan: Once I walk into a new practice that I created, it smells a certain way. Anything I add changes the smell and I have a stamp on something that I created that’s uniquely me.

DEO: How do you know how quickly to open locations? Is it based on what your cash flow can dictate?

Sam: I did not take out a loan, so I funded these de novos myself. Cash flow plays a huge role. It also depends on how many we can do at a time. From the initial signing, finding a location, and all the

way to opening day, that process takes about eight months to a year to complete.

I can only handle about two de novos a year because I usually sit in all my de novos and start them out. I get the engine going and bring on an associate after I have at least one solid day per week of patients.

Matt: We have done both self-funding and bank funding. We go as fast as it feels comfortable, and we are in a period where all our practices are 10 chairs. We've been adding about one a year, as long as our team is comfortable. Right now, they are uncomfortable, so we are going to slow it down and work on creating more infrastructure for what we have now.

everything looks good and then you open a de novo, and your cash flow sinks. Now everything looks bad, and the bank decides to pull out of any future projects. You might even lose your contact at the bank, or the bank could leave the market altogether. The capital piece is really big. Whatever your access to capital is will play a big role, and that's even aside from taking on outside capital.

The third piece is your team. Every time you add a facility, you're adding another layer of structural complexity. You have to decide the pace of scaling the team to match scaling locations. Do you overscale your team to be able to provide room for your practice to grow? Or do you act leaner to preserve cash flow in the transition? You need to establish

foot. The cost to build a de novo practice in New England was \$40-50 psf higher than Texas. And that was pre-COVID. Today after COVID it will be around \$150-\$175 in New England.

Eric: We spent \$1.3 million per de novo. Our buildings are somewhere between 3,500 to 4,500 square feet and 10 to 13 operatories for a full build-out. We also usually have a pre-emptive marketing budget that was significant. It's somewhere in the ballpark of \$200,000 of marketing money budgeted for that first year, because we need it to grow quickly. That was a typical build cost and a typical strategy for our de novos. We never went in with an unseasoned team. We made sure we had dentists that had already proven themselves in leadership and running a practice.

We only built around those dentists that we already knew, so that we didn't have to provide a lot of training and help them figure it out along the way. We pushed so much revenue and marketing money into the new location so that the chairs were full during the first three months. We spent a lot of money, but we did it in order to build practices that our dentists wanted to stay in long-term. We built their dream practice for them to help inspire retention.

Matt: We paid around \$400,000 for the first one. I built all the cabinetry and the front desk. I put my heart and soul into this as a person that just really wanted to do it on a bootstrap. My wife, who is also a dentist, helped me to build all of that cabinetry. That was the first one and they

You don't want to be opening a specialty practice and then there are three or four other practices opening that offer similar services. That will essentially kill any buzz that you are trying to build.

Eric: I think there are three pieces to look for. Number one, it's all about your vision. Like Dan Sullivan says, "There's no unrealistic plans, just unrealistic timelines." So, what is your vision and what does it need to look like? What is your strategy? That's the first piece.

The second piece is capital. If you're building an emerging dental group, you are probably using other people's money, like I was. When the capital markets are suffering, it can be a big challenge. One day,

what your strategy is going to be and what works for you when it comes to your vision, capital, and team. All of that will determine what your de novo strategy can be.

DEO: In your experience, what is the cost to open a new location?

Sam: It depends. For example, I opened my first orthodontic practice in New England in 2008, with a very tough and expensive real estate market – probably \$80 per square

are just getting more expensive as time goes on, because I'm doing less. It's important to remember that you are going to get what you pay for. I'm learning that things cost money as I build my entrepreneurial muscles.

We've been through three contractors, and we now use the most expensive one. He gave me a timeline that's completely accurate. If I look at something like the lights and say, "Those are in the wrong spot, they need to be down six inches." He will respond with "Ok, when can I get in here and do that?" With other contractors, we have had to argue and struggle to get what we wanted. Our last build was about \$700,000 at 3,500 square feet.

DEO: Everyone is always worrying about patients and new patient buildup. When do you start marketing?

Sam: Usually, we estimate the first year about \$30,000 in marketing for that orthodontic practice, and I'm looking to fill one day a week of patients. That will generate anywhere from \$350,000 to \$550,000. I like the calls to be taken two months before we open, giving the patients a couple of month's notice. I will usually put my de novos where my referrals are. With that, I'll talk to all the referring dentists and make sure that we are all good to go.

The conversation with my referring dentists usually happens a year before we even build the office because they will start holding patients for us, instead of referring them to someone else. On your first day, you could have a list of \$300,000 to \$500,000 in production, which is great.

Also, I always make sure to do my due diligence and check to see if there are any other orthodontic practices being built at the same time as ours. You don't want to be opening a specialty practice and then there are three or four other practices opening that offer similar services. That will essentially kill any buzz that you are trying to build.

Our marketing and branding is on all of our buildings. In fact, a lot of our places have up to 100,000 drive-bys per day where people can just see our branding. I like to think of that as a billboard that people are seeing all the time.

Matt: Our location is the marketing. Our downtown location has a 30-foot sign that was grandfathered in. We picked the location because of that sign. We use a retail mentality for our de novos that keeps us out of the back 40 of a medical center. Our marketing and branding is on all of our buildings. In fact, a lot of our places have up to 100,000 drive-bys per day where people can just see our branding. I like to think of that as a billboard that people are seeing all the time.

The best way to do it is to get dental demographics for where you are right now and partner with a broker you are committed to. They can help you put together a robust study with a map that can pin all the locations, numbers, and ages of the people in the neighborhood. You can get pretty good information

to get into those emerging markets and pay for a good retail space.

But it can be difficult to get into those retail spaces. It takes us a year beating the streets, and I'm usually the one that finds them. It's not typically the broker showing me where they are at. A lot of the time, those property managers say, "No, we want a restaurant." They

don't like to put dentists in the space that I'm trying to get into. I just get used to no.

Eric: I think it was Fred Joyal that said, "Everything is marketing." For us, marketing is site selection, phone skills, behaviors, and it's the attitude of the dentist going in there and seeding the population. We tried to be super preemptive about where we built our locations and spent around \$40,000 on demographic studies over the years, but we realized that the studies always recommended a location near a Walmart or a Target. So, we just decided to start building near Walmarts and Targets, which has saved us a lot of money. Grocery stores work too. The data says that moms usually drive the majority of dental expenditures on an annual basis. I want us to be in a place where

moms can constantly see us when they drive past our office three times a week. When she has a need, I want her to think of us. Walk-in population has been huge for us.

The thing about Walmart is that they don't make mistakes. When have you seen a Walmart go out of business? They have already done the work, so we just decided to keep it simple. It's worked for us in our markets, but everyone has different markets. You just have to find something that works for your region and demographics.

We spent a lot of money, time, and effort making sure that we were going to get the best performance from our providers and sustain our model. It's not perfect. It's risky. But it's what worked for us.

DEO: What is scheduling like? How do you get the practice up and running?

Sam: As an orthodontist, it's attractive to prospects that I take the time to mentor my orthodontists or orthodontic associates. I have an abundance of orthodontists all the time. Currently we need two or three orthodontists to join us because of the massive growth, but I am very fortunate to have a wealth of orthodontists to schedule. Like I said before, I start every de novo and bring my traveling team with me. We start that associate about one day a week. After that, that associate is all of a sudden traveling to probably at least three practices, filling four to five days a week.

We find associates by word of mouth. Most new graduates are afraid

to be out there by themselves sitting in a practice, and they want a mentor. When you can provide that mentorship and tell that you are there for them, it makes the hiring process easier. With technology now, we can communicate at any time about their patients. We can help walk them through the treatment process and help them come up with a plan. It makes everything much easier.

Eric: We go all or nothing from the very beginning. We are 7-to-7,

Monday through Friday to open these practices with multiple dentists. Our worst performing first 12 months was \$1.3 million, and we still lost money. We weren't profitable with that location until month 13. Our best performing location was profitable in the first month. Of course, it wasn't profitable in the second month. But we recovered and it did \$2.4 million in the first year.

In the first 12 months we flood the market for the new location and focus operationally on good internal systems. The marketing develops the leads, and we are using dentists that are million-dollar producers.

We heavily invest in those providers to get them prepared. It can be a challenge to take a great producer who is generating \$1.2, \$1.4

million a year and put them where they are essentially starting from zero. It hurts the practice they are leaving, and it hurts their paycheck.

We had to work on structuring those transitions to build in some mentorship opportunities and financial guarantees to bridge the gap. And we have to backfill an incredible dentist in there, so you have to think about the required lead time relative to what your schedule will look like. We recruit in advance to ensure that our facilities start out with multiple doctors. It was a really complicated process to push through.

We spent a lot of money, time, and effort making sure that we were going to get the best performance from our providers and sustain our model. It's not perfect. It's risky. But it's what worked for us.

Matt: We have done it all. I have worked in the practice from the beginning. We also had an associate working in another practice to build them up to give him that practice. I would say the biggest skill is to communicate what it's going to be like when they are in a practice starting up, and the hustle that you are going to expect from them. You also need to give them a guarantee.

Find the rate that's fair in your market and find someone that is hungry. I think the key to this associate game is to have a really big funnel with a bench full of people that want to work for you. You just need to create the environment that you want to work in as a dentist, which makes it easier to find dentists that want the same environment. ■

Integrated Care Models

Connecting Medical and Dental Workflows Creates Opportunities for Better Patient Care

As DSOs grow and expand their reach, some are seeing the potential for integrating with medical care providers. More than ever before, the healthcare industry is recognizing that continuity of care — creating integration between oral care and other medical care — can provide patients with better health outcomes.

Indeed, the current divide between medical and dental care often does not adequately support the needs of the patient and doesn't contribute to their overall health as much as it could. The lack of shared patient health information on a single patient record means important information is often excluded from the decision-making process when providing care.

Integrated care allows medical institutions and dental practices to work hand in hand to deliver seamless, effective, and efficient care to better meet the health needs of the patient. "All healthcare professionals, be they medical, dental, behavioral health and others, must join together in a universal effort to remove barriers to health data to support a meaningful, collaborative care environment," says Mike Baird, CEO, Henry Schein One. Doing so to implement an integrated care method requires connecting medical and dental records into a single patient record that helps improve the communication between primary care practitioners and dental practitioners. Interoperability and single patient health records are critically important when a dental

practice integrates with a medical health center. With the right tools and software in place, you can optimize your integrated care model.

What your integrated solution should look like

DSOs are uniquely positioned for partnerships with primary care providers. Finding a dental practice management system that effectively interoperates with medical systems can facilitate this partnership without sacrificing your dental-specific workflows and productivity. Here are three things you should look for in an integrated solution:

- › **Clear communication** - Clear communication processes are essential for an integrated health system. Your solution should communicate your patient's needs throughout your organization in a way that is accessible to dental and medical professionals.
- › **Streamlined workflow** - Many integrated practice management systems are based on medical models that have been modified with a handful of basic dental features. But medical

and dental clinicians practice differently. Your solution should be designed to work with medical systems without sacrificing workflows that work best for dental providers.

- › **Efficiently managed processes** - Integrated healthcare can introduce more complex processes to patient care, necessitating a solution that can handle all the unique providers and sites with a scalable database. With a comprehensive solution, you can simplify complex processes and reduce costs by housing patients, providers, and data all in one place.

Through integrated care and shared health information, DSOs have an opportunity to enhance revenue, expand access to care and improve patient outcomes. Baird says, "We are looking at future solutions for integrated care to include all medical and dental practitioners, large and small who need access to vital health information in order to realize the goal of truly integrated health care." ■

How Dentrix Enterprise can optimize your processes

Dentrix Enterprise from Henry Schein One is a best-in-class dentistry software for DSOs, group practices and public health organizations, designed to address their unique needs. Interoperable with more than 40 different medical systems, Dentrix Enterprise helps to ensure that the right data gets to the right people in the right places. Visit DentrixEnterprise.com/DGP to learn more.

Empowered Practices

Pacific Dental Services empowers supported dentists to grow their practice from the ground up.
BY GRAHAM GARRISON

Becoming an innovative organization doesn't happen by accident.

“The way I talk about it in our organization is: ‘Have your eyes on the horizon, with your nose to the grindstone,’” said Pacific Dental Services® Founder, President and CEO, Stephen E. Thorne, IV. “If you decelerate in this business for even an hour, things can veer off course quickly. You’ve got to be so intentional every day, but also have your eyes on the horizon.”



Since 1994, Pacific Dental Services (PDS) has been on the cutting edge of dentistry by balancing a day-to-day intentionality with forward-thinking approaches to care. It's evident in PDS' Private Practice +® ownership model, which provides administrative support while allowing professional independence for supported clinicians. It's clear in PDS' reputation as a technology leader in implementing advanced, proven technology and services for better clinical outcomes. And it's apparent in the organization's focus on service in local, regional and global communities.

Start in dentistry

Though Thorne is not a dentist, he comes from a family of dentists – including his father and grandfather. Thorne graduated college in 1989. Around the time of his graduation, Thorne's father asked if he would help computerize his dental office. "My father was always a fairly progressive dentist," Thorne said. "He was placing implants in the 80s as a general dentist just to give you an example."

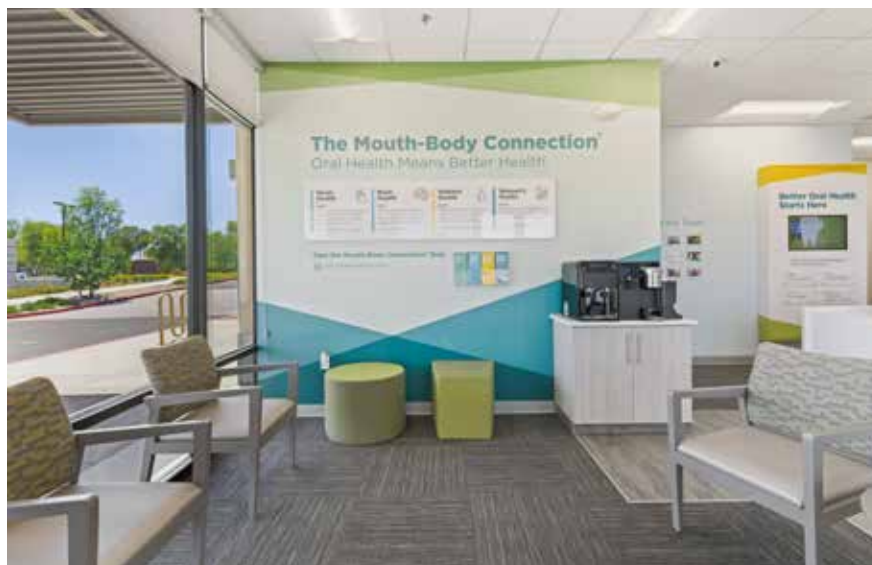
But in 1989, computers were new to dental offices, which often used pegboards for organizational and scheduling purposes. Staff often didn't know how to use computers. "But that was really good for me, because I actually had to get in and teach them how to use a computer and a computer system," Thorne said. "I had to learn the CDT codes. I had to learn the business from the bottom up." Thorne joined his dad and worked for him full time for a couple of years.

Soon, a handful of his father's colleagues asked Thorne for help as a consultant for their practices. It's in this capacity that Thorne saw the potential of dental practices grouping together. Using that consultative work and business connections, Thorne did a deep dive into all the facets of how dental practices operate, from payroll and taxes, to implementing new technology and dealing with insurance companies.

In June of 1994, PDS supported its first dental practice in Costa Mesa, Calif. By 1997, the company had grown to support nearly 20 practices. Today, PDS supports over 800 offices in 25 states.

or new practices. That's kind of our specialty. We partner with dentists who want to progress with the company and own a practice, then find the best real estate and locations and markets, sometimes years before that real estate becomes available. This model empowers supported dentists to grow their practice from the ground up with structured support from our network of clinicians. Utilizing this growth model since the beginning, we have helped to develop more than 800 successful practices to date."

The essence of the PDS business model is to enable clinicians to focus more on the patient and worry less



The PDS model

The single biggest advantage that PDS has over other business models is its individual office owner dentist model, Thorne said. "We have a true equity ownership model for dentists at each office," he said. "As we grow, we focus on what we call 'de novo'

about the business. PDS is de novo-based and grows that way. "We have local owners with local names on the door," Thorne said.

The growth of the model is based on the demand from dentists who want to get a practice. "And I can tell you it's never been better

in our history,” Thorne said. “The demand for our services is at the highest level it’s ever been, from longtime dentists to new graduates.” For instance, PDS-supported owner dentists brought on 415 new graduates in 2019. “I would put us up there probably as the largest dental school customer in the nation.”

That’s not to say PDS has been de novo exclusive during its growth. From 1994 to 1998, PDS facilitated several dental office acquisitions. “So, I know about how those work,” Thorne said. There are advantages and disadvantages to both approaches. For instance, with a de novo, there is a ramp up time where the organization may burn through some cash in those initial weeks and months. “The average time for our de novo offices to hit profitability

is nine months. So, our supported owner dentists have some time in which to build and grow to reach profitability. Whereas if you acquire an existing practice, you aim to be profitable on day one; that is, if it was the right acquisition and you use some creativity.”

The PDS model is highly decentralized to allow for flexibility within a framework because of market differences across the nation. So, working in South Florida, as an example, is a lot different than working in the state of Washington.

PDS is very clear on what it does as an organization, Thorne said. “We serve dentists. We help them serve their patients. The patients are theirs and not PDS’. But we’re fervent about serving our customer’s customer. PDS is in the B2B business.”

Indeed, PDS is a platform that dentists can use to build great practices. “We have a lot of dentists that just like one practice, and we have a lot of dentists that want to conquer the world. So, we have dentists with multiple practices too.”

“We Believe”

Even with the best model, an organization is only as good as its people. “Our people are what really make it all work,” said Thorne. PDS’ culture of values are based on a “We Believe” behavioral framework Thorne wrote in 1996. The framework “guides our daily lives, distinguishes the strength and character of our organization and directs all our critical decisions,” Thorne said. “By putting our ‘We Believes’ at the center of everything we do, we transcend



the limitations of a rules-based mindset. Our ‘We Believes’ build trust, encourage self-governance, and inspire each of us to achieve at the highest level.”

About 85% of people that come into the organization say that the belief statement is the key or a key reason they joined PDS. The organization has taken those beliefs and applied them to behaviors. For an example, one belief is that patients pay salaries. “And it’s actually worked out in how we operate the company,” Thorne said. “Each belief statement has a noun and a verb. If we believe something, we have a correlating action. And then we translate it to behaviors. In order to succeed, we must continuously establish something special between us and the patients served by our supported practices.”

Continuing care is a key driver for the organization, but not in the traditional sense. “We don’t really look at new patients as an organization,” Thorne said. “It’s probably not even in the top 50 metrics we watch closely. We have plenty of new patients walking in the door. What we focus on with our supported dentists is how many of those new patients do you actually keep?” Getting new patients is easy – just up your marketing bill. Keeping them in your practice, however, is much more challenging. Creating healthier, happier patients means seeking to understand what is important to them. Treating patients as individuals with individual needs and wants is part of the culture of PDS.

Service is also a key component of the organization’s culture. PDS



“PDS is very clear on what it does as an organization. We serve dentists. We help them serve their patients. The patients are theirs and not PDS’. But we’re fervent about serving our customer’s customer. PDS is in the B2B business.”

started its We Serve department in 2006 and it continues to grow. “I’m very proud of where we are in regards to service.” Since 2010, PDS-supported clinicians have donated over \$74 million in donated dentistry to more than 62,000 patients through monthly pro bono dentistry, the organization’s day of service, Smile Generation® Serve Day, and the Pacific Dental Services® Foundation. Over 415,000 volunteer hours have been donated by employees, hours that the organization gives to its employees to serve in their local communities.

The Pacific Dental Services Foundation, another service component, includes donations and support for areas like special needs dentistry, dental assistant scholarships, a mobile dental clinic and international service trips.

Smile Generation Serve Day, PDS’ annual day of service and part of a nationwide campaign of giving, focuses on providing donated dental care to underserved patients. It includes local service projects such as cleaning up community parks and volunteering at local food banks. Smile Generation-trusted dental offices

team up with local organizations and community partners such as After Innocence, Dental Lifeline Network, and Special Olympics International to help bring donated dental care to even more patients in need. Patients are provided with comprehensive oral health care, including cleanings, exams, X-rays, scaling and root planing, restorations, extractions, and oral cancer screenings. Since its inception in 2011, more than 21,000 patients have received donated dentistry during Smile Generation Serve Day, totaling \$39 million in oral health care.



Ultimately, it's about being good stewards of each other and also helping those in need, Thorne said. "And what I think [other dental support organizations (DSOs)] have found in building cultures is the people that serve actually end up getting more value out of the service than the people you're serving. So, I would encourage other DSOs to continue

to develop that within their organization. We're in the service business."

Higher performance levels

The sense of service and clearly articulated cultural values have created a higher level of performance within the organization. A lifelong learner and student of organizational development, Thorne came across a study done by a Harvard professor that helped clarify what it takes to find that next gear as an organization. The Harvard professor studied companies that were already considered high performing, looking at how

they got higher performance than the norm. Most of the companies were focused on growing happy employees by serving them lunch, having ping pong tables at the break room and other perks. While those were well-received, those efforts didn't translate to higher performance.

"What the professor found created a higher performance level was

the purpose of the organization, and the clarity of that purpose drove a higher level of performance," Thorne said. "It created engagement with the team."

For DSOs, that higher level of performance means consistency. "Having your purpose very clear, and the clarity of your purpose spot on for your people to understand, creates trust." Trust fuels investment. So, when people in your organization trust you and trust what you're doing, trust fuels investment in the company, the office, and the team. When trust is up, speed goes up. When speed goes up, costs go down. And when costs go down, profitability goes up.

"So, this whole idea around purpose and the clarity of your purpose is based on a very basic principle that we all understand, and that is trust," Thorne said. "Do your people trust that you have the right motives to create an organization that they want to work in, and that they want to invest extra time in?"

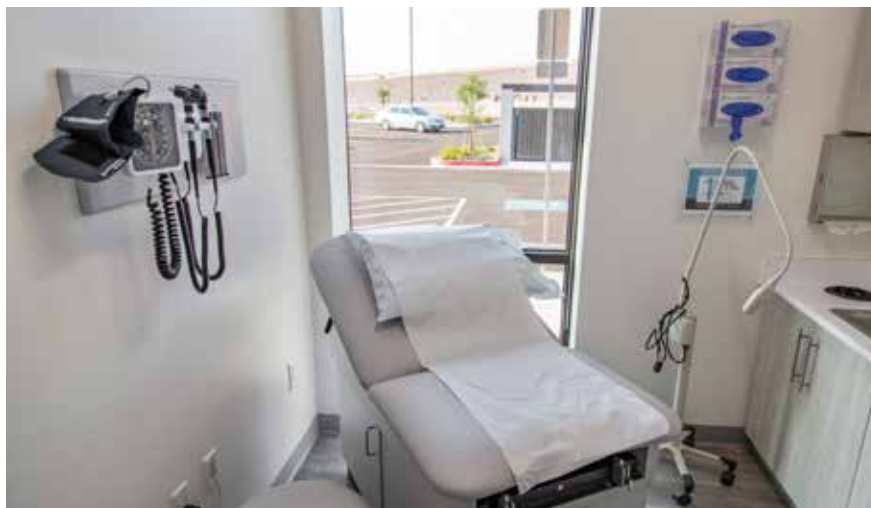
Dentistry as key to overall health

In order to improve access to oral health care, Thorne says it's essential to push for the integration of dental and medical services and for healthcare professionals to promote the practice of proper oral hygiene as a way of maintaining optimal whole-body health. There is overwhelming evidence to show that bacteria and inflammation in the mouth can indicate and even cause systemic conditions throughout the body. "At PDS, we call this the Mouth-Body Connection®. These

conditions of the mouth, including gum disease, have been linked with other medical conditions such as oral cancer, cardiovascular disease, diabetes, Alzheimer's disease, rheumatoid arthritis and more." In the future, dental practices will need to further integrate with medical practices to help provide patients with an all-inclusive continuity of care and improve both their oral and whole-body health.

"The COVID-19 pandemic has spotlighted the importance of the connection between oral health and overall health, accelerating our initiative of pushing for the integration of dental and medical services to better support the whole-body health of patients," Thorne said. "With what we now know about the oral-systemic link, it is crucial for all healthcare professionals to promote the practice of proper oral hygiene as a way of achieving and maintaining optimal whole-body health.

During the pandemic, PDS focused on the many critical infrastructure items its supported dentists needed to serve their patients and their local communities in a time of need. This included securing personal protective equipment, setting up teledentistry within a week to allow patients critical access to care, and continuing with the deployment of the Epic® electronic health records system, which integrates a patient's acute, primary, and dental health history all in one place. "With this implementation, our supported dentists now have access to their patients' health records and are able to coordinate care with other healthcare professionals on behalf



of their patients – closing care gaps and reducing duplication," Thorne said. "This powerful tool helps connect what is happening in their mouth with the rest of their body, it increases access to effective dental treatment services, reduces the total cost of their dental care, and leads to better overall health for the patient."

Additionally, being part of a large health organization allows for increased access to advanced, proven technology. These clinical treatment tools are at the forefront of oral and

whole-body health care and include CEREC® CAD/CAM same-day restorations, cone beam computed tomography (CBCT) and digital X-rays, soft tissue diode lasers, salivary diagnostics, and the VELscope® oral cancer screening system.

When Thorne talks about technology, these aren't initiatives that PDS will consider happening down the road. Many are actually in place. "It's exciting stuff," he said. "I often say to my team that we're no longer a DSO – we're a tech company." ■

Words of wisdom

When it comes to approaching growth, the best advice Thorne said he received was to invest in the infrastructure to be able to scale profitably in the future. "By building the scalable infrastructure that you need, you put yourself in a position to create a bigger return in the long run, and it helps minimize the growing pains associated with scaling up," he said. "The business also becomes more predictable which can help attract talented people."

Ready-To-Work Dental Assistants

Complete Dental Care Educational Center, Washington Academy of General Dentistry partner on dental assistant school



Dr. Mark Holifield, owner and CEO of Complete Dental Care Educational Center in Jackson, Tennessee, and the Washington Academy of General Dentistry have signed a joint venture agreement to operate a dental assistant school named the Washington Academy of General Dentistry Dental Assistant School in their Seattle, Washington office that has been recently renovated to include 10 clinical operatories. This agreement became effective July 14, 2021 and the process has already begun to obtain the appropriate certifications to begin operations in January 2022 that will mirror the Complete Dental Care Educational Center in Jackson, Tennessee, according to a release.

Dr. Holifield created the Complete Dental Care Educational program out of concern for the lack of well trained and ready-to-work dental assistants across the United States. This program, which is approved by the Tennessee Board of Dentistry and certified by the Tennessee Higher Education Commission, provides education and training to become a registered dental assistant by completing over 160 hours of study in just 4 weeks of class. Students have access to state-of-the-art dental equipment and are also allowed to observe dental procedures in a multidisciplinary setting, which includes General Dentistry, Oral Surgery, Orthodontics and Pediatric Dentistry. In Tennessee, once a student graduates the program and receives the licensing from the state, the new RDA can immediately begin work at a dental practice earning a productive wage without the heavy burden of large, outstanding student loans.



The Complete Dental Care Educational Center also offers coronal polishing and sealants classes to dental assistants who are already registered and need to add certifications to their license. Dr. Holifield's desire was to serve his fellow dental colleagues by creating the certification courses that allows dentists to send their RDA's to a local course instead of having to send them to more urban areas.

The success rate of the Complete Dental Educational Center has been exceptional with 100% of students passing the course, according to a release. Students graduating from the program, once they receive their Basic Life Support, can immediately apply to become an RDA in the state of Washington as well as the states of Tennessee, Kentucky, Arkansas, Mississippi and Utah. Additional states in the upcoming year will be added.



The partnership created between the Complete Dental Care Educational Center and the Washington Academy of General Dentistry has been carefully created to help produce highly trained and skilled registered dental assistants in the Seattle area. Prominent dental entrepreneur and Complete Dental Care Educational Center owner Dr. Mark Holifield states, “I am very proud of the joint venture agreement and look forward to the partnership with Washington Academy of General Dentistry.” ■



Getting Started with De Novos

If you want to develop a practice based on your vision, de novos are the best approach.

By Dee Fischer



Starting a dental practice takes a lot of hard work. There are no easy choices, and every decision you make introduces a set of new equally challenging questions that you have to find an answer for. Whether you are choosing to build a practice or purchase a practice, the processes are equally challenging. Even with the inherent challenges for starting a dental practice, there is one advantage to the de novos approach.

With de novos, you get exactly what you want. You get to create and manifest your vision for your dental practice, without the hassle of buying someone else's culture. With acquisitions, everything comes as a packaged deal: the doctors, the support team, the building, and the company culture. That does not mean acquisitions are less effective, but they will not have your fingerprints on them

without spending extra money after a major purchase. If you want to do this your way and develop a practice based on your vision, de novos are the best approach.

Establishing your location

First, you need to decide where you want the dental practice to be located. When I start to plan a de novo, I take a five-mile circle around

the general location that I am looking at and learn everything I can about that area. Go in and talk to the surrounding businesses to see how they are doing, what their traffic looks like, who their customers are. Who is moving in and out of the neighborhood? Are their families close by? What is the average age of the families?

In addition to the demographics of the people in the area, it is also important to understand the market of that area. Are there any other dental practices nearby? Are they in a mall? Are they standalone? I will often visit other practices in the area to see how busy they are. In fact, I will act like a patient and ask for an



appointment. If they do not have any appointments that day and the office is empty, that might tell you everything you need to know.

Not only do you want to find a community that fits what you are looking for, you also want to fit into the needs of the community. Census reports and heat maps can give you the specific information you need to know if your practice is going to fit in the community. It is all about getting out the boxes we typically operate in. That creativity will open doors and give you access to information that the usual avenues would not.

By investing time and money into research on the front end of your efforts, you will put yourself

When you open an office, you want to start with a good book where you have patients available to you from the beginning.

in a better position for opening day. Doing this ahead of time could potentially save you a lot of money in the long run. Also, it is important to trust your gut! If it feels like a bad situation, pull out before it is too late. There will always be another deal.

Building with a budget

Once you have transitioned into the building phase of your de novo, there are many different things to consider. First, you need to build smart. Do not worry about building

the Taj Mahal; build what you need to operate on day one. If you need to hire an interior designer, know the scope of the work they are going to do for you. Tell them exactly what you need them to do and nothing more. Drawing boundaries on interior decorating will keep them from tacking on projects that will increase the price of the overall job. On the other hand, buying a few buckets of paint and some inexpensive wall art is a budget friendly way to add some personality to your practice.

When you hire general contractors, there are three things you need to consider:

1. Are they able to get bonded? You need to know if the people you hire can carry a good builder's risk insurance while they work on your building. Also, ensure that they have current licenses with the Construction Commission.
2. Keep an open bid book to track the bids on your projects and track the time that your contractors spend on your projects. With a bid book, you can see the scope of the work that is

Hiring and marketing

During the construction of your practice, you should start the hiring process at a minimum of 45 days from opening day. The first person I hire is the doctor, followed by the dental assistant and the various members of support staff. Good people are an investment, so it is important to hire the best people you can find. Early on, you need to establish expectations for both parties, compensation, guarantees, and the vision of what you hope to accomplish. As important as it is that new hires are proficient in what they do, they also need to be a culture fit with

on so that you can tell people your target open date and get them on the schedule to come in. When you open an office, you want to start with a good book where you have patients available to you from the beginning.

Starting a dental office is not easy, but it does not have to be impossible. When you approach your de novos with the right questions, preparation, and mindset, you will set yourself up for success. Make smart and informed decisions at every step of the process. Even if it means you have to walk away, you will not regret being informed. ■

When you open an office, you want to start with a good book where you have patients available to you from the beginning.

needed and pick the best bid for your practice. You also need to approve everything so that the bank releases the money. For all my de novos, I sign and approve for everything. It is your property, and you need to understand where the money is going and what it is being used for.

3. Make sure that you are building contingency money! This is money that you set aside for unforeseen circumstances that may occur in the construction of your dental practice. Because it is set aside for a contingency, this is not money that the contractor is meant to touch, for any reason.

your organization. Culture is everything, but it is not really something you can train. If they do not fit your culture, that is something you want to know early on.

When I open a de novo, I start marketing 30 days into my project. That may seem early, but there are a couple of good reasons for doing this: I want to fill my book and I want people to know that we are coming. A lot of patients are on a cycle of getting their teeth cleaned every six months or so, and I want to get in that cycle of cleaning to add patients to my docket. You captivate them with a creative marketing approach and make an appointment for them. Buy practice management software early



Dee Fischer is CEO of Fischer Professional Group and has decades of experience growing DSOs helping doctors create systems, accountability, and passion in the workplace. She has been an integral part of several DSOs' exponential growth, guiding the operations and HR management to scale to larger organizations

Dee helps practice owners construct state-of-the-art locations, providing a seamless and fun experience while delivering a remarkable turn-key project on time and within budget.

Case Study: Increasing Fluoride Varnish Acceptance

How an education-based shift helped triple production : BY AMANDA HILL, RDH

Fluoride varnish treatment is an established standard of care, but many group practices routinely leave valuable varnish production on the bracket tray, or even in the supply closet. This not only affects a DSO's bottom line, it's a missed opportunity to provide a thorough prevention-focused visit, elevating the clinician from a teeth-cleaner to a healthcare provider.

One company is helping DSOs increase their varnish production through a unique program that goes beyond the usual “price-and-product” approach of other manufacturers. In this case study, we'll explore how Sage Dental increased fluoride varnish production by more than 200% through a relatively simple method: clinical education.

Varnish Hurdles

Fluoride treatments are an exceptional service for preventing tooth decay. Since the 1940s, they've been shown to be safe and effective in preventing tooth decay for both children and adults, alike.

According to the American Dental Association (ADA), 2.26% fluoride varnish (5% sodium fluoride) or 1.23% APF gel is the standard of care in professional fluoride treatment. However, patients have a low dental IQ or even fear around fluoride. Clinicians are also unsure of how to increase case

acceptance without feeling pushy or like they are “selling” treatment.

Fluoride treatment costs vary from \$25-\$35 per application, and depending on caries risk assessment, patients may or may not be reimbursed by private insurance, leaving yet another hurdle to treatment acceptance.

Why Varnish?

Commonly, DSOs look to price and efficiency when choosing products. Fluoride varnish is the perfect balance of cost and production. It's quick and easy to apply, readily tolerated by patients of all ages, and priced reasonably enough to keep the shelves stocked.

Unlike the old goopy tray method or rinses, fluoride varnishes adhere to the tooth, allowing for longer exposure time. They have proven to effectively reduce caries and help seal dentinal tubules, aiding in the relief of dentin hypersensitivity (DHS). One added bonus is that patients can feel varnish, giving them a better connection to what they are paying for.

When you've already implemented as many cost-saving measures as possible, where do you go next to boost your production? One company flipped the script and took an education-based approach. They shifted their mindset to seeing each patient as a new patient with individual needs. By doing so,

they created an effective playbook for increasing varnish production by more than 200%.

A New Approach

Young Innovations helped Sage Dental identify an opportunity to increase fluoride varnish applications by educating clinicians. Prior to the program, Sage Dental was doing \$38,000 in fluoride varnish production per month. Production had stagnated after all traditional growth avenues had been exhausted. Varnish was expiring on the shelves because clinicians didn't have a product they believed in, made time for, or understood.

Sage Dental partnered with Young Innovations to implement a fluoride varnish production program. Young Innovations has been a leading dental manufacturer since 1900 and is known for its prophylaxis angles, among many other quality preventive products.

Soaring Production

Sage Dental saw its monthly fluoride production increase by over 200% after implementing the program in partnership with Young Innovations. In month one, they saw an increase of \$30,000 in fluoride varnish production. In month two, it jumped to \$45,000, and by month three, it exploded to \$95,000.

In just three months, production tripled!

“We have an amazing partnership with Young Innovations. We switched to Young’s varnish and we saw a 75% improvement in utilization and acceptance,” said Misty Mattingly, Vice President of Hygiene Operations at Sage Dental. “The hygienists loved the product, which made them more apt to recommend it.”

“By finding a product that our hygienists liked, understood, and believed in, we were able to shift their mindset from selling a product to patients to providing a product or procedure that benefited their patient, based on the individual needs,” Mattingly said.

The Secret Formula

Let’s take a look at a hypothetical example: Practice A has 100 hygienists, with three hygienist work-days per week, seeing about eight patients per day. Approximately 50% of their patients receive fluoride varnish treatments that each cost \$35. With Young’s fluoride varnish program, this practice can grow its varnish production an additional \$42,000 per week, which adds up to \$2,167,200 per year.

Partnership Success

What makes this approach successful? Young Innovations offers a partnership that goes well beyond products and pricing. Young Clinical Representatives (YCRs) – a team of over 100 registered dental hygienists located across the United States – are trained to coach other clinicians on fluoride acceptance. Presenting their comprehensive continuing education course, *How to Take the NO Out of Varnish Recommendations*, local YCRs work

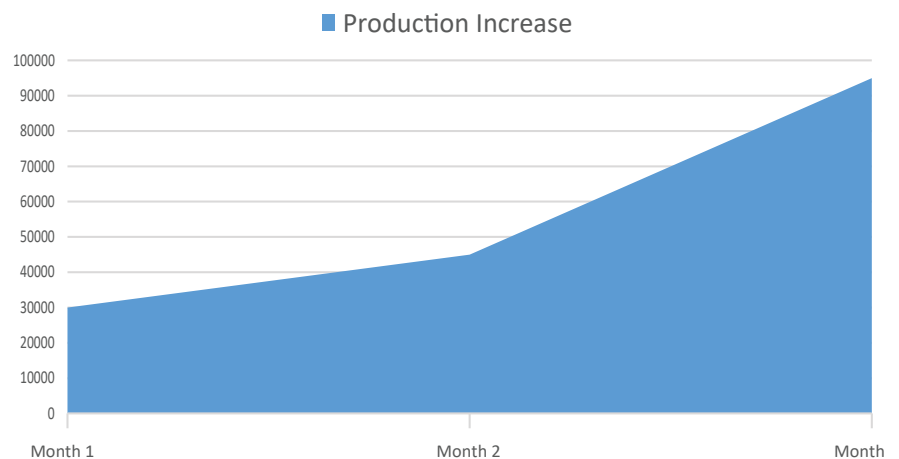
directly with DSO hygiene teams to build clarity and confidence around fluoride varnish advocacy.

When hygienists genuinely understand the why behind varnish and how to customize their recommendations to the unique needs of the patient, it goes from selling a product to providing a preventive service to a patient they care for. It no longer feels like one more task to add to an already over-packed hygiene appointment. YCRs recognize clinicians’ stumbling blocks and set them up for success. And that leads to treatment acceptance and better outcomes.

skills and understanding, hygienists can connect with patients on how fluoride varnish is the ideal preventive treatment for them.

Young Innovations is uniquely positioned to support fluoride varnish integration in DSO spaces. With more than 100 trained clinical representatives to support clinicians in group practices across the country, the program is scalable to fit any size DSO.

When Young Innovations presented this program, Sage Dental saw the opportunity to educate and empower their clinicians. By implementing this production-boosting



Driven by Results

An education-based program is a proven approach to increasing fluoride varnish production. When clinicians are given the opportunity to truly understand a procedure and move from the feeling of selling a product to feeling empowered in their role as a healthcare provider, they begin to seek out ways to improve patient outcomes. Through improved communication

program, Sage Dental was able to more than triple their fluoride varnish production and elevate their hygienists into the role of healthcare provider.

“Fluoride was just the beginning,” Mattingly said. “We are using this same approach with other initiatives and have created similar success.”

Visit youngspecialties.com/dso for more information about how you can implement this program in your group practice. ■



YOUNG INNOVATIONS
STRATEGIC
ACCOUNTS

PARTNERSHIP FOR MUTUAL GROWTH

STOP LEAVING REVENUE ON THE TRAY

What could doubling or tripling varnish production do for your bottom line? Stop leaving valuable revenue on the tray - or worse - in the supply closet. Find out how Young Innovations can help your group practice increase production and profitability in as little as one month. Scan the code to book a meeting.



The Cutting Edge

By investing heavily in technology, Edge Dental provides its patient base with quality – and convenient – dental care. : By Graham Garrison



Being able to think outside the box is important, but not easy, especially in dentistry. “Not everybody can do it,” said Dr. Marc Faber, CEO of Edge Dental Management. It takes a combination of risk, trial-and-error, and investment (i.e., time and money) to make unconventional ideas a success.

Look no further than Edge Dental’s commitment to same-day dentistry. By using the latest technology in-house, Edge Dental provides its patients services in one day that would usually take several.

Edge Dental’s commitment to same-day dentistry was born out of challenging the status quo. Dr. Faber said he and his partners at Edge

Dental – Drs. Joseph Faber and Jeffrey Kay – were frustrated with how much time it took from prep to completion for things like crowns. The way it was always done – taking an impression, sending it to an offsite lab, bringing the patient back in and hoping the crown fit, or needing 45 minutes to make adjustments – was too slow.

So, they began to work on the problem. To reduce the time it took to complete procedures, Edge Dental started with scanning back in 2015. And it worked – crowns were coming back in three days. But after a few months, they started to wonder, “why don’t we just mill it ourselves?” Edge Dental started a process of trial and error among its offices and made a significant investment in the equipment to mill what they needed. The organization also spent time and money on continuing education courses for its doctors and staff to learn how to mill and develop the

best practices. “It wasn’t an overnight thing,” said Dr. Faber. “It took years.”

But the commitment was well worth the effort. “Same-day dentistry works,” Dr. Faber said.

Patients love that they only need to take one day off from work for a crown. It’s not uncommon to hear of a patient traveling from Manhattan, New York – more than an hour and a half away – to have dental work done at an Edge Dental office so they can have it completed in a day. The Edge Dental team preps in the morning and tells the patient to come back in an hour, or sometimes a few hours later. But they don’t have to make temporaries, and when the patient returns following the prep work, they’re able to complete the procedure. The dental lab team can design and produce a host of things – inlays, onlays, veneers, implants, crowns, etc.

Also, same-day dentistry is more efficient for billing. There is no need to split up payments because the procedures are done the same-day. “When we start, we’re finishing.” Edge Dental also serves patients who otherwise may not be able to afford or have access to same-day dentistry. “We’re doing same-day crowns on Medicaid patients,” said Dr. Faber. “Only a very small number of offices in the country are able to do that.”

Doctors are also more productive. They don’t need to see as many patients – perhaps three or four – to have a good day. Dr. Faber said this allows Edge Dental to recruit younger doctors, who are often looking for less hours and more work-life balance in their schedules.

From a technical standpoint, using digital dentistry can turn an average dentist’s output to good and a good dentist’s output to “unbelievable.” Dentists can plan cases beforehand and have improved quality control with centralized design being done in-house. “Insurance companies love us for the quality we’re able to produce.”

he wants the organization to grow responsibly. In its recent acquisitions, Edge Dental has looked for the solo practitioner who has a loyal patient base but not a lot of space in the office, and not much in the way of technology such as practice management software, or even in some cases digital X-rays. Edge Dental upgrades the practice



“Same-day dentistry works. Patients love that they only need to take one day off from work for a crown.”

– Dr. Marc Faber, CEO of Edge Dental Management

Intentional growth

Edge Dental is very intentional in how it grows. The organization currently has seven practices, an administrative office, and dental lab. There are 11 doctors and about 65 employees.

Dr. Faber said they have the capital to buy several practices to beef up their numbers. But he said

with its services and expertise. The DSO will also look at whether the practice needs new space or a new location to support a larger patient base. “So, we buy these smaller practices, invest in technology and a doctor, and we’re able to grow really quickly,” Dr. Faber said. “But there are only so many of these that



we will take on at a time. That's how I feel we're being responsible."

Part of that philosophy comes from lessons learned early in Dr. Faber's career. While working for his father's practice in Brooklyn, Dr. Faber saw how critical one's health was to a solo practitioner's business. "If you build a business where you rely on yourself, your business is only as good as your health."

Another philosophy was that if you try to build an organization by yourself, you are bound to max out quickly. "I realized early on that I couldn't do it all myself,"

Dr. Faber said. "So, I built a good team around me, and more importantly, good partners."

Dr. Faber believes the market will see only more consolidation in the years ahead. "I still think there's going to be solo practitioners. I don't think they'll be gone entirely, but we're definitely going to see more corporate dentistry." DSOs are typically more invested in advances in technology such as automation and even artificial intelligence that will advance the profession.

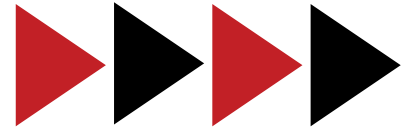
For now, clients are still shocked when they discover they can get

a crown on the same day from an Edge Dental practice. But Dr. Faber anticipates consumer expectations will change. "People are going to come to expect that," he said. Transparency will be key for the consumer of tomorrow. In the past, a dentist could tell patients they needed a filling, crown, implant, etc., and the patient would agree. "Now, I think it's more important to have objective, diagnostic tools to let the patients see the reason for the recommendation."

Edge Dental won't wait for the market to catch up. The organization has already invested in 3D printing and is finding new ways to implement that production into its procedures. All of Edge Dental's doctors are onboard with CEREC and ready to train on new innovations.

"We believe this type of dentistry is providing a better product, and better service," Dr. Faber said. "When you have that value, quality and reputation, it allows you to do a lot of different things a lot of regular offices aren't." ■

**19 UNDENIABLE FUTURE TRENDS
IN GROUP DENTISTRY THAT WILL
IMPACT YOUR GROWTH**



CURATED BY THE MOST INFLUENTIAL DENTIST-ENTREPRENEURS
IN THE GROUP DENTISTRY SPACE



INTRODUCTION

By the DEO

To scale your dental group successfully, The DEO believes it's key to surround yourself with entrepreneurial-thinking, growth-minded people. The DEO connects dentist-entrepreneurs and DSO leaders to work through challenges together. They emerge confident leaders with vision and purpose to grow their dental groups.

Having worked with hundreds of dentist-entrepreneurs, The DEO has found tremendous value in solving problems together with those who have “been there, done that” — those who are trying to get to where you are, and those who are where you want to go. The DEO subscribes to the philosophy of “Why reinvent the wheel?” With opportunities to learn new approaches for handling roadblocks as well as strategies to plan for success, dentist-entrepreneurs gain clarity and shatter the mental blocks holding them back.

To date, DEO members have 900+ practices combined with an aggregated combined revenue of \$1.3 billion. The DEO offers membership (benefits include mastermind sessions, coaching, private member events, peer learning, a resource library, and more on associates, leadership, operations, and systems, recruiting, retention, financial structure, and all the issues dental group leaders face) plus twice-yearly Summits open to the public.



The DEO has curated this resource to help dentist-entrepreneurs/leaders of emerging dental groups survey the current and future trends. Understanding the impact of these trends will help you decide what is necessary for the next step toward achieving your scaling vision.

THE DENTAL ORGANIZATION GROWTH MODEL™

No matter where you are on your dental group’s growth journey — looking to add your first location, grow from 1-3, 3-5, or 5-10 locations, or beyond, you are inevitably going to run into some tough issues, everything from hitting your own “leadership ceiling,” to hiring and training your team, systems and infrastructure, revenue cycle management, to creating leaders, and more.

The DEO understands these issues from helping hundreds of dentist-entrepreneurs grow their dental groups and has developed a framework — The Dental Organization Growth Model™ — to help leaders get out

of the “dark tunnel” and solve the issues that are lurking there. This framework can help you determine where you need to spend your time, where your biggest issues are, and where you need to level up.

To be a confident leader, and stay out of anxiety (at least most of the time), looking through the prism of consistent clarity will help you. Paying attention to the current and future trends in business and the group dentistry industry will help you confidently approach your goals and challenges. Use this guide to survey the current and future trends.



INDUSTRY TRENDS

What is one thing that most growing businesses have in common? They look at trends and look towards the future when implementing strategies in order to facilitate growth and to prevent failure (Fail example: Blockbuster not getting into streaming). The same is true in the dental Industry. Group practices looking to grow must take advantage of trends, and they must make the future work for them, not against them. Fortunately, we (The DEO) are giving you a chance to prepare, and potentially take advantage of these trends by building this trend report.

To download the full report, simply scan the QR code (seen to the right of this page) or visit <https://deodentalgroup.com/19-future-trends-in-group-dentistry/> to gain instant access.

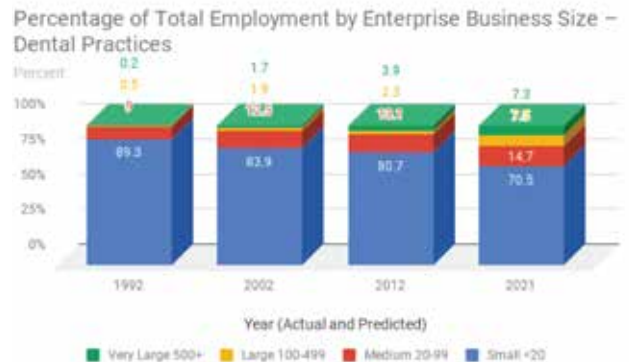


5 Industry Trends To Watch

No. 1: Dental Industry Consolidation Likely to Accelerate

It's no surprise that the dental industry is consolidating. That said, the rate at which consolidation will occur in the near future is something worth noting. Large groups / DSOs have seen about 15% growth over the past decade. However, forecasts predict that this same growth rate will be seen in a far shorter time frame. More specifically, this 15% growth rate is likely to be achieved in the next 5 years rather than the previous growth period of 10 years. This indicates a potential market consolidation rate of 30% in 2021.

Why this is important: As the industry keeps consolidating, groups that decide to grow may fare better than smaller groups. Larger groups (> 3-4 locations) will have more bargaining power for supplies, they'll offer more security to incoming associates, and they'll likely have more in-tuned systems among many other things. As the trend grows, the competitive advantages of the multi-location / DSO model are likely to put downward pressure on single location, mom-and-pop practices.



No. 2: Traveling Specialists and In-House Specialty Procedures

Again, in response to reducing insurance reimbursements and increasing competition, practices small and large are finding ways to improve financial performance. One way they're doing this is by bringing specialty procedures in-house. According to Synergy Specialists, 60% of patients referred out of the practice never end up proceeding with specialty care. The 40% that actually commit to treatment end up converting another 60% to restorative treatment. As such, the days of referring out dentistry are diminishing. Groups are starting to bring

in Travelling Specialists and/or are training General Dentists to perform specialty procedures. Some estimates predict that more than 50% of dental treatments related to extractions and implant cases are expected to be performed in the private practices of general dentists within the next 10 years.

No. 3: Dental Therapy Becoming Mainstream

Another way groups are cutting costs for both themselves and patients is by recruiting the help of Dental Therapists. Dental Therapists can provide mid-level dental procedures under the supervision of a Certified Dentist at a fraction of the price. Additionally, some states even allow for indirect supervision. This provides more flexibility for aid to be given to those in more rural areas. Dental therapy allows practices to provide affordable dentistry while expanding their footprint. Since cost of care and convenience are the number 1 and 2 reasons why people don't receive dental treatment respectively, expect the presence of dental therapists to rise in the near future as the profession can potentially assuage those issues.

No. 4 Private Equity Will Continue to Pour Money into Dental

Investor capital is expected to pour into the dental industry as consolidation continues. Private Equity firms are drawn to efficiencies that chains (Multi-Location and DSOs) can bring to individual dental practices, which these days require sophisticated marketing and expensive technology. Less than 10% of dentists are affiliated with corporate-backed practices, according to the American Dental Association, so there's a lot of room for consolidation and subsequent investors to get into the space. Moreover, according to Karan Garg at Houlihan Lokey, there's still around \$1 trillion available for investment in Private Equity. Estimated at \$130 billion, the DSO market is larger than urgent care, physical therapy, dermatology, and the veterinary space combined. This indicates that DSOs are attractive investments and are likely to see extensive funding from that \$1 trillion in Private Equity capital in the coming years.

Why this is important: Private Equity may accelerate the rate in which consolidation occurs. Investor money and resources will give groups more leverage to expand and/or build efficiencies in their business. Growing groups can take advantage of this trend whereas the increased rate of consolidation is likely to put downward pressure on single-location practices.



No. 5: Marketing Adjustments for Voice Search

This future trend does not just pertain to dentists. However, it will affect marketing strategies in the Dental Industry. Voice searching is becoming (if it isn't already) a prevalent method for accessing information. Proof of this can be seen in the consumer market today where tech giants are fighting to have their voice products in people's homes. Amazon has Alexa, Google has Google Home, Apple has Siri, etc. Data suggest that 40% of adults use voice search to access information every day, and it's estimated that 50% of all searches will occur through voice by 2020. This trend is worth noting for dentists due to voice search queries. Of the voice searches that occur right now, about 22% of them are about local information (40% for directions). Since city / county locals likely make up a large portion of a practice's target market, these local searches are especially relevant to them. As such, expect Dental Groups to adjust their SEO strategies in the future to take advantage of this highly relevant form of finding information.

North American Dental Group appoints Jonathan Walker as CEO



Jonathan Walker, currently CFO of North American Dental Group (NADG), has been named chief executive officer. He succeeds Ken Cooper, an NADG co-founder who led the company since its inception in 2008 and successfully grew NADG from a single clinic to be one of the nation's leading Dental Service Organizations (DSOs) supporting 250 locations across 15 states. Cooper will transition to an advisory role within the company focused on development and new affiliation opportunities.

"I am extremely grateful for this opportunity to lead one of the best-known and best-run DSOs in the country and to be supported by so many terrific doctor partners and team members," Walker said. "Thanks to Ken's leadership, I am stepping into the CEO role at a great time in the organization's trajectory. With its unique culture, dentist partner led operating model, and strong reputation for high quality care, NADG is well positioned for

continued success. This is an exciting time for our company, and I'm thrilled to lead NADG into a period of sustained growth."

Cooper co-founded NADG with Dr. Andrew Matta, a practicing dentist in New Castle, PA. Dr. Matta will continue serving in his current role as NADG's Chief Medical Officer.

Prior to joining NADG, Walker served as CEO of Pittsburgh-based MedExpress, helping that company more than double in size in four years and become one of the nation's premier urgent care operators with more than 300 walk-in centers and worksite clinics across 26 states. Earlier in his career, he worked as an investment professional within the retail and health-care service sectors at American Securities, a leading U.S. based private equity investment firm.

42 North Dental makes two executive appointments

42 North Dental (Waltham, MA) announced it has added two new executive officers. Diane Vaccaro was named as chief marketing officer and Thomas "TJ" Brouillard was named as CFO. Vaccaro has over 20 years of multi-site marketing experience with a strong focus on consumer behavior, scalability, and a customized branding approach. Previously Vaccaro held the CMO & CBO position at MyEyeDr. TJ Brouillard joins the executive team having held various senior level financial positions at KPMG and Fresenius, including CFO of Fresenius North America and CFO of Global Transformation and Shared Services. In addition to

leading financial activities, TJ will play a key role in 42 North Dental's affiliation strategy and technology stack development.

Children & Teen Dental Group rebrands as Oak Dental Partners, plans to enter adult, family markets

Children & Teen Dental Group (C&TDG) has changed its name to OakDentalPartners. Founded in 2015 by CEO Lee Provow, the company is a DSO with 25 affiliated pediatric dental and orthodontic offices across Georgia, Florida, Alabama, and Pennsylvania. The company says that the new name reflects the organization's decision to expand into adult and family dentistry. While the name will change at the DSO-level, the company said that Children & Teen Dental Group will continue to exist as a standalone division of the company, solely focused on pediatric dentistry and orthodontics.

"With a new name fitting our growth trajectory and expanded service offerings, Oak Dental Partners is positioned to better and more broadly execute our mission 'to support our practices in positively impacting lives by improving smiles, confidence, and overall health,'" says CEO Lee Provow.

CandidPro partners with Women in DSO

CandidPro, a clear aligner innovator, has partnered with Women in DSO to help empower women leaders in dental service organizations. Founded in 2019, and officially launched in 2021, Women in DSO aims to connect

and support women leaders in high-performing dental groups throughout the country. As a lifetime founding partner, CandidPro will work with Women in DSO to support mentorship, networking, and education initiatives that will enhance Women in DSO's platform. The partnership between Women in DSO and CandidPro also speaks to the organizations' shared values. Candid's President, Cathrin Bowtell, says, "Serving an increasingly diverse patient population means it's critical for us to promote representation both in our organization and among our partners. I'm proud to prioritize diversity at Candid, and I'm proud to help Women in DSO galvanize female thought-leadership in the dental industry."

Smile Brands CEO Steven Bilt honored at annual Dykema DSO Conference

Smile Brands (Irvine, CA) CEO Steven Bilt received the Dental Titan Award at the 8th annual Dykema DSO Conference. Dykema, a leading law firm in dental services, created the Dental Titan Award to recognize individuals that have achieved extraordinary accomplishments and have made a profound impact on the industry. "During a year when most businesses were simply trying to survive," explained Brian Colao, Director of Dykema's Dental Service Organizations Industry Group, "Steve provided inspiring leadership to the entire dental industry, closed one of the biggest transactions of the year, established a platform to promote employee well-being and

social justice, entered into an innovative partnership to provide greater access to patients for orthodontic treatment, and continued his philanthropic work through the Smiles for Everyone Foundation." Smile Brands supports nearly 700 affiliated practices, with more than 7,500 dedicated team members across 30 states. Smile Brands supports a portfolio of over 75 brands including well-known regional brands.

USOSM expands into California through new partnership

U.S. Oral Surgery Management (USOSM) (Irving, TX) announced a new partnership with the Center for Oral & Facial Surgery (San Diego, CA). This is USOSM's first partner practice in California. Established in 1927, the oral and maxillofacial surgery practice is the oldest and largest practice in San Diego County. The Center for Oral & Facial Surgery has two offices: one in San Diego and another in El Cajon, California. The practice has four board-certified surgeons: Dr. James R. Eckstein, Dr. Brian K. Oleksy, Dr. Derek J. Havas

and Dr. Justin R. Messina. The practice offers a full scope of oral and maxillofacial procedures including dental implants, wisdom teeth removal, bone grafting, tooth extractions and more. USOSM now has partner practices spanning 15 states: Texas, Colorado, Georgia, Tennessee, Minnesota, Alabama, Oklahoma, Louisiana, South Carolina, Mississippi, Florida, Indiana, Kentucky, Arizona and California.

Progressive Dental Concepts names new chief dental officer

Progressive Dental Concepts, LLC (Camp Hill, PA) announced that Stephen Canis, DMD, CDC, was named chief dental officer for the organization. Most recently, Dr. Canis served as National Dental Director for United Concordia Dental/Highmark where he was a dental advisor and clinical consultant to dentists nationwide. He helped lead the organization's quality assurance and clinical review process. Previously, Dr. Canis was an independent dentist practitioner in Pennsylvania, Massachusetts and Rhode Island.

EVENT

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Managing Locations

Editor's note: **The DSO Secrets:** *Dentist Entrepreneurs Growing Dental Organizations Facebook page is a place to find resources, networking opportunities, information about upcoming industry events, and a forum to ask fellow dentist entrepreneurs questions you may have about running your business. The following was a recent discussion among DSO Secrets Facebook page members.*



Rani Ben-David Sgs asked: For a new DSO with 8 locations, who would you need to manage them? COO, GM or someone else?

DSO Secrets Facebook page members responded:

“It depends. Does each location already have a Practice Manager that handles HR matters? Is there a Regional Operations Manager and Chief Clinical Officer in place? How many days per week is the founder working chair-side? How far are the practices from each other? Do you have dentists in each location who have equity or a profit-sharing arrangement? What is your budget for the role?” – **Sina S. Amiri**

“COO or VP of Ops (Director of Operations minimum) type role would be appropriate / particularly if one assumes that the entity as a whole grosses \$10M+ annually.” – **Patrick O’Rourke**

“An accountability chart. Roles first, titles second.” – **Greig Davis**

“A referee. Just kidding. Kind of.” – **Paul Goodman**

“I would agree with Sina S. Amiri. There are a lot of factors to consider when building an executive team. I would also include to consider what the near/long term goals for you and the group are and where the needs/gaps are. I would say operational roles tend to be what is needed. However, it can be clinical, HR, etc. I would encourage an evaluation of each department and find the weak spot or the spot that will have the biggest impact to solve the most issues.” – **Jon Fidler**

“Org chart with Chief Clinical Officer, Director of Operations, HR/Recruiter, 2 Regional Managers and a Practice Manager for each office.” – **Terry Wakefield**

“Strong HR & OPs team. But also depends how [spread out] your offices are or how many regions are they sliced into. As the owners, you don’t want too many layers between you and actual team working in the office. What you see/analyze having your skin in the game, will have a far more impact than anyone.” – **Arunav Chakravarty**

“Director of Operations. VP and COO can wait a little longer.” – **Amol Nirgudkar**



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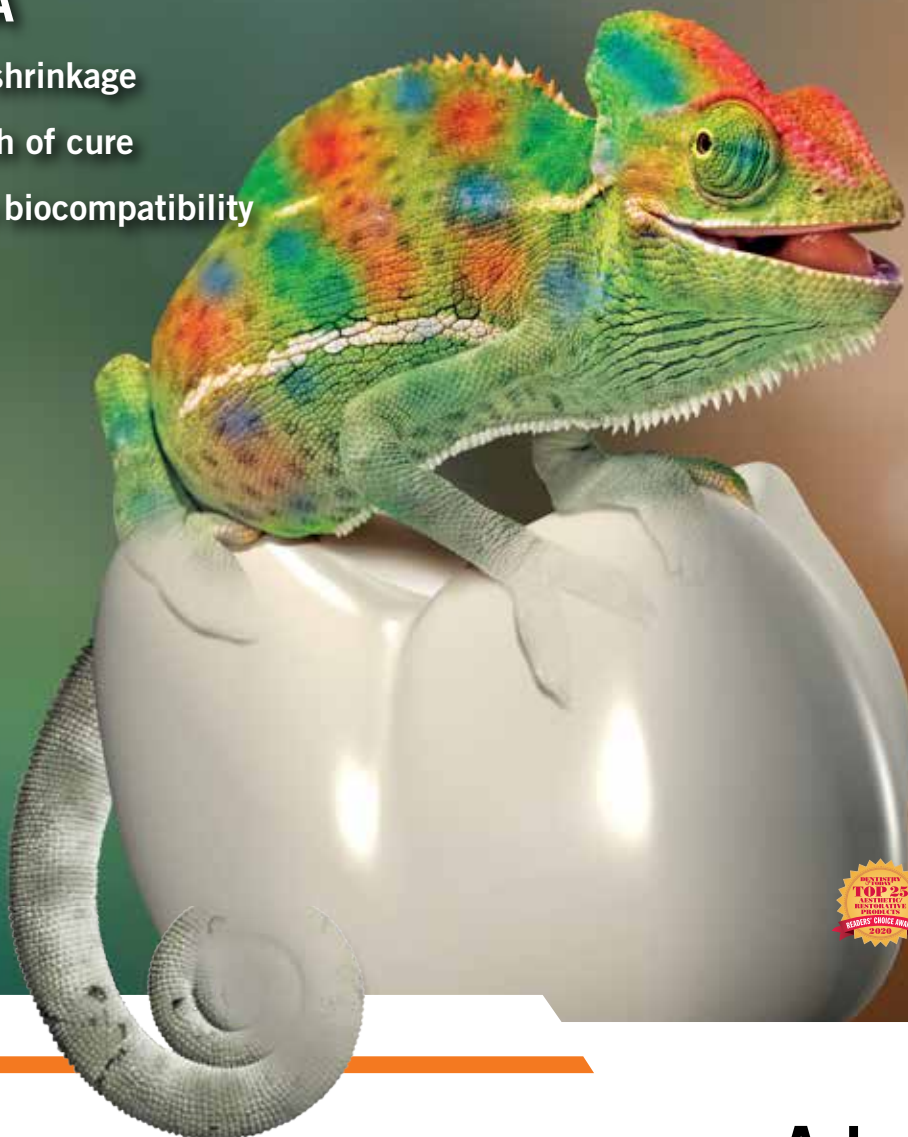
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