

GREG WINTEREGG DDS, DISCUSSES THE WHEN AND HOW OF ADDING DENTAL ASSOCIATES

(This is Part One of a two part article on the subject of Dental Associates.)

Several times a week I field associate related questions from colleagues. These come from dentists who need one right away, as well as those just entertaining the idea for the future. The pros to adding an associate are obvious: more service for your patients, potentially more time off, someone to cover emergencies, etc. There are also plenty of cons: your patients may not like the new doctor, and you might worry about them making off with your patient base, etc. When discussing associates, thirteen years in private practice and close to as many as a trainer/consultant have taught me one hardbound rule: there is definitely a right and wrong way to go about this associate business.

If one or more associates are in your future plans (whether this is now or ten years from now), there are several things to consider:

1. When should you get an associate?
2. How would you structure compensation?
3. What's the best way to find one?
4. What are the important points to cover when interviewing?
5. How will you integrate them into your practice?

I'll start with number one: When should you get an associate?

Arguably, this is the most important question. This is also where I see the most errors made. Let's say you are doing moderately well, still have some openings in your schedule and get about 10 new patients per month. You decide to expand your hours and bring in an associate to become more productive. The reasoning seems sound – you are adding more hours and providing more treatment opportunities for your patients – but this rarely works. New patients don't magically show up, the associate is unproductive and unhappy. You either a) let him or her move on or b) start moving work from your schedule to make the associate busier/happier. The net result is less profit and a problem, i.e. "how do I keep my associate busy?"

In this scenario the office was in no position to justify adding an associate. As such, this begs the question: How do I know when the "right time" is? To answer this question, ask yourself the following:

- a) Is your practice growing (or has it grown up to now and you just seem to have "maxxed out")?
- b) Are you scheduled efficiently?
- c) Is your business profitable?
- d) Is your schedule relatively full?

If you answered "Yes" to all of the above, now is probably a good time to add an associate.

I'll give you this scenario: Your practice has rapidly (or steadily) expanded up to a point where you can't take in more patients than you currently are. You are operating efficiently and the office is profitable. You just can't see more people and things start to book out a couple of weeks in advance. Now is the time to add that associate to serve three purposes:

- 1) To provide faster and more efficient service to your patients,
- 2) To lighten your schedule so you can focus on the type of work you want to do and
- 3) To increase practice productivity.

If my practice was in the above situation, I would look at adding an associate – perhaps one to two days a week to start and roll from there.

From a practical standpoint, I would also look at how many charts I had. In my experience 1,000 charts, if handled efficiently, can potentially keep a doctor and hygienist productive. Also, maintaining a ratio of one doctor to one hygienist seems to work best. If you are already have two full time hygienists (who are booked), chances are you need an associate now. However, you also need to consider the other points above.

Business survival is inexorably connected to expansion. If the office is well-run (which would mean that it was expanding at least a little bit), there would come a time when you couldn't produce any more yourself and would need an associate. The level of production that will require an associate will be based on your style of practice, fees, type of dentistry you do, etc.

At MGE (<http://www.mgeonline.com>) we suggest you get an associate when there is more work than you personally can handle and patients are being pushed out on the schedule too far.. How long is too long for them to wait? Although this is ultimately your decision, it shouldn't be more than a couple of weeks.

Too long of a wait is just not good service!

One of the questions asked above when deciding whether or not you should add an associate, asked about expansion. How much expansion do you need? To start, are you even getting enough new patients to support yourself? How many should you be getting? This depends in a large part on how you practice, but I'll give you a basic formula to use:

- a. Take your total number of active charts
 - b. Multiply this by 20%
 - c. Divide "b" by 12 (months in a year)
 - d. The figure from "c" above gives you the minimum number of new patients you should be getting on a monthly basis to maintain your practice's health.
- Note that this is just to keep you going. You would definitely need to exceed this number to add an associate.

Example: Dr. Smith has 1200 active charts. 20% of this is 240. 240 divided by 12 is 20. To maintain a healthy practice, Dr. Smith should be getting at least 20 new patients each month.

Keep in mind this formula assumes a couple of conditions exist:

- a) The new patients are fee-for-service.
- b) The doctor has an acceptable skill level when it comes to treatment presentation and acceptance (which is reflected in production and collections).

If you want an associate, I would recommend that you far exceed this 20% factor. This is where the "MGE New Patient Workshop" comes in handy – whether you want an associate or not. If you want more fee-for-service new patients to keep your practice healthy, to expand or to make it possible to add an associate the "New Patient Workshop" is the solution.