## What Happens if You're Not There?

Fred Heppner



As a small business owner, a dentist has many responsibilities to keep the business running smoothly; employing staff, maintaining the office equipment, marketing for patient flow to name a few. However, with all the careful planning and attention to detail, there is one aspect that the majority of dentists don't plan for, which is how to keep the business viable if they are unable to practice. Every year a fellow practitioner may unexpectedly lose the ability to practice due to an unexpected injury or illness. Weeks or months of lost practice time will affect patients, staff and cash flow. Moreover, disability insurance has a waiting period before benefits will be paid, typically three months. In this article, I wish to share events that I have witnessed and ways in which they were handled in hopes that others may benefit through proper planning and organization.

Since 1983 when I first became involved in dentistry, I have worked in nine major metropolitan cities and served clients in countless others. During that time, numerous events occurred that were both sad and frustrating. Dental offices were left stranded without a practitioner for a variety of reasons including: a dentist needing time off for recuperation after emergency surgery, dentists with broken arms or hands, and unexpected death.

In these cases, the dentist wasn't able to treat patients, the employees in place didn't know what to do, and the spouse often did not have the business acumen to carry forth the business operations and the business faltered. In the event of death, a practice's productivity would plummet until a potential buyer arrived with an offer far less than the previously thriving business was worth. Sad, but true, the estate of the deceased dentist may be left with little if any proceeds from the sale of an asset.

Most dentists carry disability insurance, but again the period of time until benefits begin may be far too long to wait for much needed funds. This can destroy a fine dental practice. An option to managing operating expenses when little income is being generated is to carry office overhead insurance. This policy protects the short-term financial needs of a practice with payments until the disabled dentist returns to work.

But even overhead insurance has limitations; will the proceeds from insurance enable the office to remain viable, keep the patient base intact, and continue to employ staff until the dentist is able to work again or the practice is sold? Most likely the answers to these posed questions are NO. Rather than **risking harm** to a most valuable asset, dentists may consider becoming involved with a group of conscientious dentists in their community who would help **Preserve** a **practice** if something **unexpected** happened to one in the group.

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I have designed a successful program to help a 'fallen' dentist's practice remain viable. It is based on a simple premise, that the dental community is a caring one, willing to volunteer services for fellow comrades. The program is termed "Inter-Practice Protection", and it has worked successfully in Arizona since developed in 1997. The concept is straightforward: form groups of like dentists who agree to volunteer coverage for each other in times of illness, short-term disability, trauma, or death. This is not an insurance policy; rather, it is assurance that a practice, the team of employees, and patients will continue to be served. Inter-Practice Protection provides coverage for the practice during a dentist's absence to ensure that it does not lose production, the team continues to work, and patients continue to receive care.

Since its inception, nearly one hundred dentists in the greater Phoenix Metropolitan Area have formed six separate groups to cover for their practices should an untimely and unexpected mishap occur. These groups are well-structured and organized associations of private practicing dentists who have committed to volunteering a day of their time if a colleague within the group is unable to practice.

Members of the group operate their own private practices and collectively volunteer their time to care for patients and keep the fallen dentist's office functioning while the doctor rehabilitates, or until the practice is sold. Patient payments for treatment provided by the covering doctors are made to the practice being covered.

After activating groups for a variety of reasons, such as cardiac surgery, a broken arm, a broken hand, and even an untimely fatal heart attack, the coverage specifics have been fine-tuned, with the participating dentists input. In addition, the groups' dynamics have become stronger with each passing year. Following are guidelines for effective operation of the coverage groups:

- The groups are comprised of about 17 dentists.
- A Chairperson and Vice-Chairperson are elected by the group to function as administrators of group communications, manage annual meetings, and coordinate activation for a doctor needing coverage when necessary.
- The group provides coverage if a member is not capable of provid-



ing usual dental services due to non-intentional mishaps, illness, disability, or death. Normal maternity, without complications, substance abuse, and alcoholism shall not be considered a disability or illness.

- Upon the event of a disability, the member or family member promptly contacts the Chairperson to advise coverage is needed. The Chairperson then calls an activation meeting to be held at the disabled member's office within 24 hours and creates a coverage schedule with the members of the group.
- Coverage begins no later than 15 days after the date of disability, and continues for a maximum of 12 weeks. Coverage will cease when the disabled member returns to practice, or upon death when the practice is sold.
- Members covering a practice are not responsible for managing, administering, or directing the business of the disabled member's practice. A personal representative, family member, or other representative of the practice is responsible. Members may assist without any obligation to do so, but are not liable for any damages.
- The dental team should notify patients of the disability and make known the name of the covering dentist prior to the patient's appointment. The team will maintain all normal business operations, cooperate and assist the member who is providing coverage, and ensure there are adequate supplies and personnel for the practice of dentistry.
- Members are not obligated to cover more than their allotted num-

- ber of days. After the entire roster of the group is contacted for coverage, any more additional days of coverage by a member is voluntary.
- Contact your malpractice insurance company and ask them specifically: "In the event of my untimely death, will my policy allow for patients to be treated in my office by my staff under the supervision of a dentist volunteering his time and still provide malpractice coverage?"
- Each member must review their personal information to be sure that the Power of Attorney is delegated to a significant other so that payments for accounts payable and payroll may be made without delay.
- If a member is contracted with an insurance company as a preferred provider, then the member must find out guidelines for each particular plan in the event another doctor, who may or may not be contracted with that insurance company in his or her own practice, treats patients during a covered period. This will ensure payments for treatment rendered to patients are made to the doctor's office receiving coverage.
- Members of the group agree that if a patient of the doctor who is receiving coverage wishes to pursue care from the volunteering dentist, the volunteering dentist will decline to accept the patient in his or her practice until a waiting period has passed. In the event of a disability or illness, one hundred and eighty (180) days shall pass. In the event of death, ninety (90) days shall pass.
- Attendance to an annual or biannual meeting is urged to reunite

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with fellow members, review past year's events, and demonstrate commitment to the group.

Prior to covering at another practice, a schedule may be faxed so
that the covering doctor may review the patient load and treatment mix. At that time, the covering doctor may consider bringing some of his or her own instruments.

Through careful planning and preparation, the groups here in Phoenix were well organized and ready to step in under any circumstances.

On the evening of July 31<sup>st</sup>, 2003 around 7 p.m., I received a call from a periodontist who is a member of the "Concerned Periodontists", an Inter-Practice protection group in Phoenix. He informed me that a fellow periodontist had passed away suddenly and unexpectedly of a heart attack at the age of 41 at his home that morning. By 7:30 a.m. the next day, the coverage group was activated and within a few hours a schedule was created in which eighteen periodontists had volunteered their time over the next sixty days to cover the practice.

I arrived at the deceased periodontist's practice at 10:30 a.m. and was met with an enormous amount of gratitude and appreciation by the team. To know that the doctor had thought ahead and aligned himself with a conscientious group of practitioners was such a relief to his staff, and to know the practice would be covered in this difficult time lifted a huge weight of concern off their shoulders. In the following weeks, patients were treated, the staff continued to work, and the business continued to operate while the surviving estate planned for the practice's sale.

No one really knows what tomorrow brings. We plan for our practices to grow, we plan to maintain a happy and productive team of employees, we plan for retirement, and we hope to have enough insurance coverage to provide financial help in catastrophic situations. Be prepared and have a plan in place so that your practice will continue to be productive when you're not there.

Fred Heppner is a business management advisor who has served the dental industry since 1983. He has enhanced dental and medical offices across the country in the areas of marketing, practice analysis, strategic planning, insurance management, financial arrangements, accounts receivable control, personnel management, and Electronic Data Interchange.

Mr. Heppner's in-depth knowledge of business management systems and strategies has helped hundreds of practitioners enhance the financial health of their practice. Fred helps doctors and their teams establish and implement solid, proven business techniques that meet both patient and practice needs. He provides practical advice for immediate application and excellent results.

He resides in Phoenix, AZ, with his wife, Susan, and daughters Mary and Rose. His consulting firm specializes in professional, objective practice guidance. Mr. Heppner can be reached at Proactive Practice Management 480-513-0462 or by email fredheppner@cox.net.

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