

1. Dental Productivity Guidelines

Productivity benchmark: At least 2,300 visits annually. Each FTE dentist should see **at least** 1.7 patients per hour or 13.5 patients per day (2,500-3000 patient visits per year). Each 1 FTE dental provider has a minimum of 750 patients.

Payer source benchmark: 40% Medicaid; 30% sliding fee schedule; 20% uninsured; 10% insured

Ratio of FTE dentists/FTE dental assistants: 1:1.5

Ratio of FTE dentists/operatories: 1:2

Level of care: 50% or more of onsite dental treatment services are prevention and restorative; less than 20% of all dental services are level four, regardless of funding source (Level 4: Limited rehabilitation such as complex amalgams -4 or more surfaces; crowns, bicuspid two-canal root canals; surgical extraction, root recovery procedure, etc). If the clinic provides level four or higher services, patients are charged enough to cover the cost without using 330 grant revenues.

Charges:

- All charges are based on “full fees” of the usual and customary scale of the region in which the practice is located. Sliding fee scale reductions are based on the “full fee scale” and reduced from 100% based on income of patient against the federal poverty level.
- The health center should have a set ceiling on patient past due balances (*accountable receivable A/R*) that must be settled before future appointments can be rescheduled

No show rate: Below 20%

Managing no-shows:

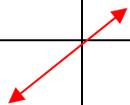
- Do not schedule for more than a month
- Charge a minimal fee for broken appointments or no-shows before new appointments are scheduled
- Limit habitual no-shows to walk-ins
- Do not provide more than one additional scheduled appointment if balance is due

Cost per dental patient: Less than \$350 per year

Patient encounter cost: Less than \$130 per visit

Ratio of filling/extraction: Between 1 and 6. Lower than 1 = Low emphasis on prevention. Greater than 6 = Neglect towards the need of level one emergency care

500 fillings/1,000 extractions = 0.5	1,000 fillings/1,000 extractions = 1.0
6,000 fillings/1,000 extractions = 6.0	8,000 fillings/1,000 extractions = 8.0



Policies and procedures

- The health center dental program should have written protocols and procedures including billing and collection policies and procedures
- The health center dental program should have measurable goals with objectives and timelines
- The health center dental program should have a process to evaluate program process
- The health center dental program should demonstrate linkages with the community
- All patient referrals to specialists should be tracked to ensure timely compliance with visits, and patient charts should be flagged if they fail to keep referral appointments

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Resources: New Dental Director Manual
 Author: Dr. Bob Russell