

North Shore Louisiana General Dentistry
ENTREPRENEUR FINANCIAL DATA SUMMARY FOR PRACTICE 9317

The following statistics are based on assumptions that the subject practice will continue to be operated as it has been in the past. Variation from past performance are 1) increase in fees for each year; 2) no production increase occurs; and 3) overhead expenses increase each year. Fee and overhead increases are based on estimates of inflation and can be adjusted.
 The purpose of this summary is to demonstrate the individual practice revenues and profitability of this particular practice.

PRACTICE FINANCIAL SUMMARY

AMOUNT OF INCOME PERSONALLY GENERATED BY PURCHASER **\$6,483**

COMPENSATION FOR PURCHASER FOR HIS/HER PRODUCTION.
 CONSIDER A GENEROUS COMMISSION RATE OF 35% **\$2,269**

NOW CONSIDER THE PRACTICE PROFIT. THIS IS AN AMOUNT OVER AND ABOVE THE COMPENSATION FOR PURCHASER'S PRODUCTION.

THE PROFIT IS THE BENEFIT OF OWNERSHIP OF THE PRACTICE.
 ONLY PRACTICE OWNERS REALIZE PRACTICE PROFIT.

IN THIS PRACTICE, THE PROFIT, AFTER ALL EXPENSES AND SALARY
 COMPENSATION TO THE PURCHASER IS PAID AMOUNTS TO **\$0**

TO COMPARE THIS OPPORTUNITY TO OTHER OPPORTUNITIES, LOOK AT SEVERAL KEY DATA POINTS.	SUBJECT PRACTICE
1. HOW DOES THE ALTERNATIVE COMPARE WITH BEFORE TAX DOLLARS (AFTER DEBT SERVICE)	\$97,986
2. ARE THERE TAX SAVINGS AND EQUITY INCREASES FOR THE PURCHASER	\$119,658
3. TOTAL ECONOMIC BENEFIT - NET CASH FLOW (AFTER DEBT SERVICE), EQUITY, AND TAX SAVINGS	\$217,643

North Shore Louisiana General Dentistry				
ENTREPRENEUR DATA FOR PRACTICE			9317	
The following summary illustrates a projected year's income and expenses for the subject practice which incorporates an increase in fees and overhead expense but no increase in production. This summary is not a representation or warranty of future practice performance. Purchasers should obtain qualified legal and accounting counsel prior to any purchase decisions. NOTE: Practice price does not include accounts receivable.				
PRACTICE INCOME				
EXPECTED GROSS COLLECTIONS			\$1,296,606	100.0%
HYGIENE COMPONENT			\$303,376	23.4%
DENTIST COMPONENT			\$993,230	76.6%
RETAINED SELLER				
ASSOCIATE			\$986,747	76.1%
PURCHASER			\$6,483	0.5%
VARIABLE EXPENSES				
WAGES, PAYROLL TAX, ETC.			\$354,694	27.4%
LABORATORY			\$43,881	3.4%
CLINICAL SUPPLIES			\$87,020	6.7%
OTHER VARIABLE EXPENSE			\$410,306	31.6%
			TOTAL VARIABLE EXPENSE	\$895,901
				69.1%
FIXED EXPENSES				
RENT			\$69,600	5.4%
PHONE, UTILITIES			\$12,126	0.9%
LEGAL & ACCOUNTING			\$6,695	0.5%
INSURANCE			\$7,725	0.6%
OTHER FIXED EXPENSE			\$72,801	5.6%
			TOTAL FIXED EXPENSE	\$168,947
				13.0%
PRACTICE DEBT SERVICE				
INTEREST			\$37,264	2.9%
PRINCIPAL			\$96,508	7.4%
			TOTAL DEBT SERVICE	\$133,772
				10.3%
SUMMARY				
EXPECTED COLLECTIONS			\$1,296,606	100.0%
EXPECTED EXPENSES			\$1,064,848	82.1%
PRACTICE DEBT SERVICE			\$133,772	10.3%
EXPTD NET INCOME AFTER EXPENSES AND DEBT & PERCENT OF PERSONAL PROD.			\$97,986	1511%
PURCHASER PRODUCED PRODUCTION			\$6,483	0.5%
EQUITY INCREASE & PERCENT OF PERSONAL PRODUCTION			\$96,508	1488.6%
TAX SAVINGS FROM DEPRECIATION & PERCENT OF PERSONAL PRODUCTION			\$23,150	357.1%
TOTAL ECONOMIC BENEFIT-CASH, TAX SAVINGS, EQUITY & % PERSONAL PROD.			\$217,643	3357%
THIS CASH FLOW EXAMPLE IS BASED ON THE FOLLOWING ASSUMPTIONS:				
PRACTICE SALES PRICE & PERCENT OF GROSS			\$1,059,000	84%
WORKING CAPITAL			\$63,000	
TOTAL PRACTICE LOAN			\$1,122,000	
PRACTICE LOAN INTEREST RATE			3.60%	
PRACTICE LOAN TERM IN MONTHS			120	
PRACTICE MONTHLY PAYMENT			\$11,148	10%
PURCHASER CASH FLOW CONSIDERATIONS				
MONTHLY PRACTICE PAYMENTS			\$11,148	10%
ESTIMATED MONTHLY HYGIENE AND ASSOCIATE PROFIT			\$47,622	44%
PURCHASER SALARY BASED ON 35% OF PERSONAL PRODUCTION			\$2,269	
PRACTICE PROFIT - IN ADDITION TO PURCHASER SALARY			\$252,638	23%
TOTAL PURCHASER SALARY AND PRACTICE PROFIT			\$254,907	
			LESS PRACTICE DEBT SERVICE	(\$133,772)
PURCHASER SALARY, PROFIT AND TAX SAVINGS AFTER DEBT SERVICE			\$121,135	

North Shore Louisiana	
ENTREPRENEUR DATA FOR PRACTICE NUMBER 9317	
The following data is provided by the owner of the practice. It is believed to the best of the owner's knowledge to be a true and accurate representation of the facts of the practice. It is the responsibility of any purchaser to verify all information contained herein and to seek qualified counsel in the interpretation and verification thereof.	
OFFICE DATA	
SQUARE FOOTAGE OF OFFICE	3,834
EXPANDABLE FOOTAGE	
CURRENT MONTHLY RENTAL i.e. "1200"	\$4,000
PRICE PER SQUARE FOOT	\$12.52
IS OFFICE HANDICAPPED ACCESSIBLE?	Yes
NUMBER OF PARKING SPACES	26 + 2 handicap
PROXIMITY OF PARKING PLACES	On site
# EQUIPPED OPS	7
NUMBER OF PLUMBED BUT UNEQUIPPED OPERATORIES	1
NUMBER OF OPERATORIES USED PRIMARILY BY DENTIST(S)	5
NUMBER OF OPERATORIES USED PRIMARILY BY HYGIENIST(S)	2
NUMBER OF UNPLUMBED AND EMPTY OPERATORIES	
DO YOU OWN YOUR BUILDING? YES OR NO	YES
DO YOU WISH TO SELL THE BUILDING? YES OR NO	NO
IF NOT APPRAISED, ESTIMATED BUILDING PRICE	
IF NOT SOLD, MONTHLY RENTAL AMOUNT	\$5,800
ANNUAL REAL ESTATE TAXES	\$6,485
ANNUAL REAL ESTATE INSURANCE COST	\$21,778
DATE OF LEASE i.e. "6/1/2016"	
DATE LEASE ENDS - i.e. "1/1/2020"	
IS THERE AN OPTION TO PURCHASE?	
RENEWAL OPTIONS	
BUILDING VALUE TO BE USED	
PURCHASER MORTGAGE INTEREST RATE	4.50%
PURCHASER MORTGAGE TERM - YEARS	20
PURCHASER MONTHLY PAYMENT	
PURCHASER CURRENT MONTHLY RENT	
PRICE PER SQUARE FOOT	\$18.15
WORK SCHEDULE	
PLANS AFTER SALE OF PRACTICE	
DAYS/WEEK CURRENTLY WORKED	4.0
HOW MANY DAYS WOULD YOU PREFER TO WORK FOR BUYER	
DESIRED WORK DAYS/WEEK 1ST YR	
DESIRED WORK DAYS/WEEK 2ND YR	
DESIRED WORK DAYS/WEEK 3RD YR	
DESIRED WORK DAYS/WEEK 4TH YR	
DESIRED WORK DAYS/WEEK 5TH YR	
DESIRED WORK DAYS/WEEK 6TH YR	
COVID INFORMATION	
DATE CLOSED FOR COVID	March 19, 2020
DATE REOPENED FOR COVID	May 21, 2020
DATE OF LATEST PRACTICE REVENUE	December 31, 2020
AMOUNT OF LATEST PRACTICE REVENUES	\$987,771
ANNUALIZED 2020 COLLECTIONS ADJUSTED FOR TIME CLOSED	119382919%
AMOUNT OF ANY PPP OR EIDL LOANS	

PRACTICE DATA	
MANAGEMENT CONSULTANT IN LAST 5 YRS? IF SO WHO?	Yes; Scheduling Institute
RESULTS	Excellent
DESCRIBE INTERNAL MARKETING	
DESCRIBE EXTERNAL MARKETING	Marketing director handles social media, website, magazine
HAS GROSS CHANGED SIGNIFICANTLY? WHY?	
LIST SEDATIONS USED - NITROUS, DOCS, IV SEDATION	Nitrous Oxide, DOCS
IS YOUR PRACTICE MERCURY FREE - NO AMALGAM?	No
WHAT TYPE RECALL SYSTEM	Patients
WHAT TYPE COMPUTER SYSTEM	Dentrix
PURCHASER MUST PERSONALLY VERIFY PATIENT POPULATION DATA & REDUCED FEE PLANS	
ESTIMATE NUMBER OF PTS LAST 18 MONTHS	3,290
AVERAGE NUMBER OF NEW PATIENTS PER MONTH	61
AVERAGE NUMBER PTS TREATED PER DAY BY DENTIST(S)	10
AVERAGE NUMBER PTS TREATED PER DAY BY HYGIENIST(S)	1
HOW FAR AHEAD IS DENTIST SCHEDULED?	One Week
HOW FAR AHEAD IS HYGIENIST SCHEDULED?	Six Month
PRACTICE DATA	
% INCOME FROM CASH	64%
% OF PATIENTS PAYING CASH	64%
% INCOME FROM INSURANCE	36%
% OF PATIENTS WITH INSURANCE	36%
% PRACTICE INCOME FROM CAPTITATION	
% OF PATIENTS WITH CAPITATION	
% PRACTICE INCOME FROM MEDICAID	
% OF PATIENTS WITH MEDICAID	
% PRACTICE INCOME FROM REDUCED FEE PLANS	
% OF PATIENTS WITH REDUCED FEE PLANS	
SCHEDULING DATA	
MONDAY	7 AM - 5 PM
TUESDAY	7 AM - 5 PM
WEDNESDAY	7 AM - 5 PM
THURSDAY	7 AM - 5 PM
FRIDAY	
SATURDAY	
	43909
OWNER HOURS WORKED PER WEEK	36
ASSOCIATE HOURS WORKED PER WEEK	
HYGIENIST HOURS WORKED PER WEEK	72
DENTIST PATIENT VISITS PER YEAR	2,027
HYGIENE PATIENT VISITS PER YEAR	2,847
NUMBER OF DAYS WORKED PER YEAR	197
NUMBER OF WEEKS WORKED PER YEAR	50
COLLECTION DATA	
WHAT IS YOUR COLLECTION PERCENTAGE	
ACTUAL ACCOUNTS RECEIVABLE BALANCE	\$79,860
WHAT IS YOUR PATIENT CREDIT BALANCE	\$50,080
ACCOUNTS RECEIVABLES - CURRENT	\$55,734
ACCOUNTS RECEIVABLES - 31-60 DAYS	\$2,364
ACCOUNTS RECEIVABLE - 61-90 DAYS	\$1,715
ACCOUNTS RECEIVABLE >90 DAYS	\$20,047

WHAT PERCENTAGE OF THE PRACTICE INCOME IS:

HYGIENIST PRODUCTION	24%
OPERATIVE	32%
PEDODONTICS	
ORTHODONTICS	
IMPLANTS	5%
REMOVABLE PROSTHETICS	4%
FIXED PROSTHETICS	4%
ENDODONTICS	6%
PERIODONTICS	6%
ORAL SURGERY	8%
COSMETIC	
TMJ TREATMENT	
SOFT TISSUE MANAGEMENT	
OTHER	11%
TOTAL	100%

WHAT SERVICES ARE REFERRED OUT? Ortho, advanced perio, difficult oral surgery(sinus lifts, bony impact)

REVENUES SOURCES

IS ANY OF YOUR REPORTED INCOME FROM ANY OTHER SOURCE THAN PATIENT TREATMENT FROM THIS PRACTICE?	No
IF SO HOW MUCH IN CURRENT PERIOD?	
IF SO , HOW MUCH FOR LAST YEAR?	
IF SO HOW MUCH FOR THE PREVIOUS YEAR?	
WHAT IS THE SOURCE OF THIS OTHER INCOME?	

FEE SCHEDULE

ADULT PROPHY 01110	\$114
TWO SURFACE ANTERIOR COMPOSITE 02331	\$252
CORE BUILD-UP 02950	\$329
CROWN - GOLD/PORCELAIN 02750	\$1,389
ANTERIOR CANAL ROOT CANAL 03310	\$925
PANORAMIC X-RAY 00330	\$102
TWO SURFACE POSTERIOR COMPOSITE 02392	\$288
CROWN - PORCELAIN CERAMIC 02740	\$1,384
LABIAL PORCELAIN VENEER 02962	\$1,425
BICUSPID ROOT CANAL 03320	\$1,048
AVERAGE OF FEES	\$726
PERCENT OF FEE PARITY	133%

DEMOGRAPHIC DATA

WHAT IS APPROX. POPULATION OF YOUR CITY OR TOWN	28,781
WHAT IS APPROX. POPULATION OF YOUR DRAWING AREA	260,419
APPROXIMATE NUMBER OF GENERAL DENTAL PRACTICES WITHIN	sixteen Slidell
MAJOR EMPLOYERS IN AREA	

DESCRIBE ANY MAJOR ECONOMIC CHANGES IN DRAWING AREA	

YEAR BEGINNING PRACTICE IN CITY	2008
YEAR BEGINNING PRACTICE IN CURRENT LOCATION	2008
RIGHT OR LEFT HANDED	3 Doc - Right; 2 Doc - Right/Left; 2 Hyg - Right/Left
PURCHASE OR SCRATCH START	Scratch

STAFF DATA						
POSITION	YEAR HIRED	STAY	BENEFITS	ANNUAL SALARY	HOURLY SALARY	ANNUAL COST OF BENEFITS
RECEPTIONIST				5105		
OFFICE MANAGER				57464		
ADMINISTRATOR				32100		
SCHEDULING COORDIN.				12035		
RECEPTIONIST				634		
ASSISTANT				42439		
ASSISTANT				26743		
ASSISTANT				35686		
ASSISTANT						
ASSISTANT						
HYGIENIST						
HYGIENIST				72309		
HYGIENIST				67592		
HYGIENIST				6892		
LAB TECHNICIAN						
LAB TECHNICIAN						
ASSOCIATE				4761		
ASSOCIATE						
ASSOCIATE						
	12					
WHAT BENEFITS DO YOU PROVIDE FOR THE STAFF?				Holiday pay, sick pay, vacation, 401(k); 3% safe harbor contribution		
COST OF BENEFITS PROVIDED FOR EACH EMPLOYEE						
DO YOU HIRE ANY UNPAID FAMILY MEMBERS?				No		
WHAT POSITION DO THEY HOLD?						
WHAT IS THE ESTIMATED MARKET VALUE OF THEIR JOB?						
ARE THERE ANY EMPLOYEES WHO ARE PAID MORE OR LESS THAN THE NORMAL SALARY FOR THEIR POSITION?						
WHAT POSITIONS AND WHAT IS AMOUNT OF OVER/UNDER COMPENSATION FOR EACH						
COLLECTION CENTERS						
				2021	2020	2019
GROSS COLLECTIONS				\$1,509,573	\$987,772	\$1,460,854
OWNER COLLECTIONS				\$1,147,276	\$725,462	\$874,145
HYGIENIST COLLECTIONS				\$347,202	\$223,745	\$358,517
ASSOCIATE COLLECTIONS				\$15,096	\$4,012	\$165,284
ASSOCIATE COLLECTIONS				\$1,509,573	\$556	\$30,483
ASSOCIATE COLLECTIONS					\$695	\$14,933
ASSOCIATE COLLECTIONS					\$33,301	
ASSOCIATE - SALARY IN DOLLARS / COMMISSION PERCENT				\$0	\$0	\$0
HYGIENIST - SALARY IN DOLLARS / COMMISSION PERCENT				\$0		

CONFORMITY DATA			
DOES YOUR PRACTICE MEET OSHA STANDARDS? WHY NOT?	Yes		
DOES YOUR PRACTICE MEET HIPAA STANDARDS? WHY NOT?	Yes		
ANY DISCIPLINARY ACTION IN LAST 7 YRS? EXPLAIN	No		
ANY PRACTICE LAWSUITS FILED IN PAST TEN YRS. EXPLAIN	No		
DESCRIBE ANY HEALTH PROBLEMS WHICH WOULD AFFECT YOUR PRACTICE OF DENTISTRY?	None		
INSURANCE EXPLANATION			
TOTAL EXPENSE FOR INSURANCE IN CURRENT PERIOD	\$25,206		
HOW MUCH OF TOTAL IS FOR OWNER HEALTH INSURANCE?			
HOW MUCH OF TOTAL IS FOR STAFF HEALTH INSURANCE?			
HOW MUCH OF TOTAL IS FOR OTHER OWNER BENEFITS?			
HOW MUCH OF TOTAL IS FOR MALPRACTICE INSURANCE?	\$3,428		
HOW MUCH FOR TOTAL IS FOR BUILDING INSURANCE?	\$21,768		
TAXES AND LICENSES EXPLANATION			
TOTAL EXPENSE FOR TAXES			
HOW MUCH OF TOTAL IS FOR PAYROLL TAXES?	\$42,177		
HOW MUCH OF TOTAL IS FOR STAFF PAYROLL TAX?	\$29,069		
HOW MUCH OF TOTAL IS FOR OWNER PAYROLL TAX?	\$13,108		
HOW MUCH OF TOTAL IS AD VALOREM (PRACTICE EQUIP)?	\$4,958		
HOW MUCH OF TOTAL IS FOR REAL ESTATE TAXES?	\$6,485		
PENSION EXPLANATION AND 401k COMBINED			
TOTAL EXPENSES FOR PENSION PLAN			
HOW MUCH OF TOTAL IS FOR STAFF			
HOW MUCH OF TOTAL IS FOR OWNER?			
BENEFITS EXPLANATION			
TOTAL EXPENSE FOR EMPLOYEE BENEFITS			
HOW MUCH OF TOTAL IS FOR STAFF?			
HOW MUCH OF TOTAL IS FOR OWNER?			
PLAN NAME - BE SURE TO LIST DELTA PREMIERE IF YOU HAVE	% OF PRX INCOME FROM THIS PLAN	% OF YOUR FEE THIS PLAN PAYS	
Delta Dental	9%		
Cigna	3%		
Aetna	2%		
United Concordia	5%		
MCNA	7%		No longer accepting NP
Humana	6%		
United Healthcare	2%		
Guardian	2%		
	36%		

