



WESTERN PRACTICE SALES

John M. Cahill Associates

#GN-988

Yuba City, California

Practice your best dentistry in this community located in the greater Sacramento Valley, just minutes from the picturesque Sutter Buttes and bordered by the Feather River. With a Mediterranean-like climate and a multi-cultural population, you can have the best of both worlds: location and lifestyle which can't be beat: diversity, close proximity to perennial recreational activities in Shasta, Tahoe and big city amenities of Sacramento and San Francisco.

The Doctor averages 5 - 8 patients w/ 5 - 7 Hygiene patients per day offering 3 days of hygiene/per week and generates approximately 5 new patients per month.

The office is conveniently located in an attractive, well-maintained Dental Professional building with ample parking, on major thoroughfare in highly visible, easily accessible corridor of desirable neighborhood. The spacious office occupies approximately 1,600 square feet and consists of 3 fully equipped Ops, Reception area, Doctor's offices, Business office, Sterilization, Lab, Storage and 2 Restrooms.

Excellent Merger Opportunity!

Full Price: \$100,000

For further details or on-site visit, please contact:

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► **Honesty** ► **Integrity** ► **Professionalism** ► **Experience**

We look forward to serving you

GN-988

WESTERN PRACTICE SALES / JOHN CAHILL ASSOCIATES

\$100,000

PRACTICE INFORMATION SHEET

OFFICE OPERATION INFORMATION

	SUN	MON	TUE	WED	THUR	FRI	SAT
Office Hours		8 - 5	8 - 5		8 - 5		
Doctor's Hours		8 - 5	8 - 5		8 - 5		
Hygienist Hours		8 - 5	8 - 5		8 - 5		
Type of Practice:	General			Reason for Selling:			Personal
Years established:	~ 38 yrs			Days worked past 12 months:			~ 180 days

OFFICE SPACE & LEASE INFORMATION

Is the building/suite owned?	No	Is building available for purchase?	N/A				
Is the space leased?	Yes	Is lease renewable?	N/A	Is lease assignable?	N/A		
Term of Lease:	New Tenant will Require New Lease			Expiration date:	May 2019		
Do you share space with another dentist?	No						
Rent per month	\$2,900/monthly		Common area, maintenance fees /taxes included?	Yes			
If not included, current amount paid?	N/A		Are utilities included?	No			
Is the rent considered above, below or at fair market value?	Above						
Type of Building:	Condo	Free-standing	X	Professional	X	Retail Center	
Office Square footage:	1,600 sq ft		Carpet?	Yes	Air conditioning?	Yes	
Number of fully equipped ops:	3		Plumbed for additional ops?	No			
Reception area:	Yes	Dark room:	Yes	Doctor's office:	Yes	Lab:	Yes
Business office:	Yes	Restrooms:	Yes, 2	Sterilization:	Yes	Storage:	Yes
Digital X-ray:	No	Cerec:	No	Laser:	No	Intra-oral Camera:	Yes
						3D Imager:	No
Description of office building, Location and attributes of practice (a brief description):	Fantastic corner location! Attractive, well-maintained, single-story medical professional complex w ample parking, easy accessibility and excellent visibility						

PATIENT DEMOGRAPHICS

Breakdown of Service/Procedures as a percentage of Collections:

Preventative/Hygiene	27.28	Diagnostic	22.85	Adjunctive	0.37	Dentures	3.0
General Operative	36.28	Endo	0	Ortho/TMJ	0	Perio	1.82
Oral Surgery	0.40	Cosmetic		Crown/Bridge	7.53	Other	0.47

What services/procedures are referred out? (i.e. Oral Surgery, Endo, Perio, Ortho, Pedo)

All Endo, Complex Oral Surgery – 3rd molar extractions, Difficult Perio and patients w/ health issues

Type of patients as a percentage of Collections:

Private Pay **58%** Insurance/PPO **41%** Denti-Cal **0** Capitation (HMO) **0** Other **1%**

Are you a **Delta Provider**? Premier Only _____ **Premier + PPO** **Yes**

***Delta Premier:** Dentists enrolling for the first time in the Premier Network are also being required to enroll in the PPO network. The requirement to sign with both networks will result in treatment provided to those Delta PPO patients within the practice being reimbursed at the PPO level, without the ability to balance bill those patients to Premier rates. This could result in a reduction in the practice collections that could lower the buyer's projected income depending on the amount of Delta DPO patients in the practice who have actually paid the difference between the fee schedules.

Does your practice participate in "Care Credit"? **Yes**

List Preferred Provider, Health Care Provider and Capitation Plans now in place:

Delta, Cigna, Aetna

Estimated Number of Active Patient Files: **Number to be defined by Buyer's Due Diligence Process***

***SELLER IN NO WAY WARRANTS THE EXACT ACCURACY OF PATIENT FILES. IT IS THE BUYER'S RESPONSIBILITY TO DEFINE AND VERIFY ACTIVE PATIENT FILES WITH A CHART REVIEW. PRACTICE VALUE IS PREDOMINANTLY DETERMINED BY SELLER'S COLLECTIONS. SELLER'S COLLECTIONS CAN BE INDICATIVE OF THE NUMBER OF ACTIVE PATIENTS AND TYPE OF PROCEDURES PERFORMED.**

Average number of New Patients per month for past 12 months: **~ 4 - 5**

Average number of patients per day? Per-Doctor: **5 - 8** Per-Hygienist: **5 - 7**

Hygiene days per week: **3 days** Percentage of Production by Hygiene: **~ 25+**

Average age of patients: **~ 45 years plus**

Does the office have Nitrous Oxide? **Yes**

Type of recall system used? **Postcard Reminders**

Number of recalls per month? **~ 40**

What types of Practice Promotions? **None**

Phone Book Advertising? * **Yes** * *Phone book advertising contracts will be the responsibility of buyer after transition.*

EQUIPMENT & LEASEHOLDS

Occasionally some specialized items may be excluded from the sale, such as: Articulators, Endo and/or Implant Systems. These items will be referenced as "excluded" on Seller's Equipment list. In addition, Buyer understands that the following items may also be excluded from the sale: diplomas, certificates, cameras, photographs, artwork and miscellaneous personal items.

Describe age and characteristics of leasehold improvements: **Building is ~ 25 yrs. old**

Average age of Equipment: **Varies: 10 - 30 years**

Any equipment leases? **No** Equipment is right/left-handed/convertible? **Right**

PERSONNEL

Position	Days/Hrs	Date hired	Rate of Pay <i>Available Upon Request</i>	Eligible for benefits
Front/Ins/Assistant	3 days x 8 hrs			
Dental Hygiene	3 days x 8 hrs			

Do family members work in the office? **No** If yes, how much are they paid? **N/A**

Has staff left the practice recently? **Yes**

Is there a practice management consultant? **No**

PRACTICE FINANCIAL PROFILE

Last 3 years' Gross Collections from Tax Returns:

2018 \$227,370 2017 \$ 250,723 2016 \$ 265,730

***Collection amounts are approximate and should be verified by Buyer**

Number of statements sent each month? Is pegboard or computer? **Computer**

What type of computer? **Dell – PC** What software? **Dentrix**

Is software transferable? **Yes, Transfer Fee, if applicable, to be paid by Buyer**

Fees Schedule: **Available upon request**

NOTE: The Seller has furnished the preceding information to WESTERN PRACTICE SALES/JOHN M. CAHILL ASSOCIATES. This information has not been verified. A potential Buyer should verify the accuracy of all information to his/her own satisfaction.

WESTERN PRACTICE SALES/JOHN M. CAHILL ASSOCIATES are agents of the Seller and therefore represent the interest of the Seller. We strongly advise a potential purchaser to seek independent counsel to represent his/her interests. Counsel may be, but is not limited to, an attorney, accountant, appraiser, broker or management consultant. Fees of such counsel are the sole responsibility of the purchaser.