



WESTERN PRACTICE SALES

John M. Cahill Associates

EN-627

Carmichael, California

Seller has developed a quality HMO practice with a wonderful patient base in this highly desirable greater Sacramento community and is passing it on to you. This remarkable opportunity awaits your talent and skill!

The Doctor averages 18 patients and generates approximately 15 - 20 new patients per month.

The office is conveniently located in an attractive, well-maintained, single-story Professional building on one of the busiest major thoroughfares, located in a highly-desirable mixed Retail/Residential neighborhood, within close proximity to a hospital.

The office occupies approximately 1,200 square feet and consists of 3 fully equipped Ops w/ plumbing for an additional Op, Reception area, Doctor's office, Sterilization, Lab, Digital X-ray, and 1 Restroom.

Full Price: \$268,000

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

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▶ **Honesty** ▶ **Integrity** ▶ **Professionalism** ▶ **Experience**

We look forward to serving you

EN-627

WESTERN PRACTICE SALES / JOHN CAHILL ASSOCIATES

\$268,000

PRACTICE INFORMATION SHEET

OFFICE OPERATION INFORMATION

	SUN	MON	TUE	WED	THUR	FRI	SAT
Office Hours		9 - 5	9 - 5	9 - 5	9 - 5	9 - 5	
Associate's Hours		9 - 5	9 - 5	9 - 5	9 - 5	9 - 5	

Type of Practice: **General/HMO** Reason for Selling: **Personal**Years established: **~ 1½ yrs** Days worked past 12 months: **~ 210 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? **Yes** Is lease assignable? **Yes**Term of Lease: **5 yrs** Expiration date: **February 2020**Do you share space with another dentist? **No**Rent per month **\$ 1,545.00/month** Common area, maintenance fees /taxes included? **Yes**Are utilities included? **No**Is the rent considered above, below or at fair market value? **Below Market Value**Type of Building: Condo Free-standing **Professional X** Retail CenterOffice Square footage: **1,200 sq ft** Carpet? **Yes** Air conditioning? **Yes**Number of fully equipped ops: **3** Plumbed for additional ops? **Yes, 1 additional**Reception area: **Yes** Dark room: **No** Doctor's office: **Yes** Lab: **No**Business office: **No** Restrooms: **Yes, 1** Sterilization: **Yes** Storage: **No**Laser: **No** Digital X-ray: **Yes** Intra-oral Camera: **No** Cerec: **No**Description of office building, Location and attributes of practice (a brief description): **Single-story Professional building on major thoroughfare with close proximity to Hospital**

PATIENT DEMOGRAPHICS

Breakdown of Service/Procedures as a percentage of Collections:

Preventative/Hygiene	20	Diagnostic	20	Adjunctive	Dentures	5
General Operative	20	Endo	5	Ortho/TMJ	Perio	
Oral Surgery	10	Cosmetic	10	Crown/Bridge	10	Implant

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

Complex Endo and Perio

Type of patients as a percentage of Collections:

Private Pay 5 Insurance/PPO Denti-Cal 95 Capitation (GMC/HMO) Other

Are you a Delta Provider? **No** If Yes, Delta PPO Delta Premier

***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:

HealthNet, Liberty and Access

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: **~ 15 - 20**

Average number of patients per day? **20** Per-Doctor: **20** Per-Hygienist: **N/A**

Hygiene days per week: **N/A** Percentage of Production by Hygiene: **N/A**

Average age of patients: **~ 30 yrs**

Does the office have Nitrous Oxide? **No**

Type of recall system used? **None**

Number of recalls per month? **~ 30 - 40**

What types of Practice Promotions? **None**

Phone Book Advertising? * **No** * *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:

Digital X-rays, Compact Office – set-up for Efficiency and Function

Average age of Equipment: ~ 12 yrs

Any equipment leases? **None** Equipment is right/left-handed/convertible? **Right**

PERSONNEL

Position	Days/Hrs	Date hired	Rate of Pay	Eligible for benefits
Dental Assistant	5 days / wk	2015	\$12.00 / hr	Yes
Front Office	5 days / wk	2015	\$13.00 / hr	No
Dental Assistant	5 days / wk	2016	\$12.00 / hr	No

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

Has staff left the practice recently? **No**

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

PRACTICE FINANCIAL PROFILE

Last 3 years' Gross Collections from Tax Returns:

2015 \$ 258,489 2014 N/A 2013 N/A

***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? **PC** What software? **Easy Dental**

Is software transferable? **No**

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.