Hygiene department profitability can be a challenge. However, in today's profit sucking PPO environment, it is even more of a challenge. Evaluate your own hygiene department profitability with the following By-the-Numbers process. Once you review your practice data, you can decide where you need improvements. This issue starts with the MOST common culprit - OPEN appointment time - and continues with other numbers to “Crunch” to determine your hygiene department profitability.

Open Time By-the-Numbers - Unless you can keep 95% of your hygiene time full with patients, you will struggle with profitability.

Example: Harriett Hygienist averages $98 per patient
- Has 2 BA’s per day on average
- $98 x 2 = $196 x 200 = $39,200 lost Revenue

To calculate your open time, you’ll need to keep at least two weeks of the hygiene schedule. Print the hygiene schedule at the beginning of each day, during the day have the front office team track the broken, cancelled, open appointments on the schedule. At the end of two weeks, count up the numbers of available appointments and divide into the number of filled appointments. This will give you a percentage. You want 95% or more filled appointments.

Salary to Production Ratio - Next, calculate your hygiene salaries compared the their production. Yes, in a PPO environment this is adjusted production. Use a period of time with at least 3 months of data. I usually recommend 6 months. The salary data is wages only with bonuses and holiday or vacation pay and without benefits.

<table>
<thead>
<tr>
<th>Hygiene Wages</th>
<th>Benchmark</th>
<th>Example</th>
</tr>
</thead>
<tbody>
<tr>
<td>Harriet</td>
<td>$14,275</td>
<td></td>
</tr>
<tr>
<td>Sally</td>
<td>$15,007</td>
<td></td>
</tr>
<tr>
<td>Total Hygiene Salaries*</td>
<td>$29,282</td>
<td>30-33%</td>
</tr>
<tr>
<td>Hygiene Production</td>
<td>$76,327</td>
<td>38.4%</td>
</tr>
</tbody>
</table>

* Hygiene salary should be 1/3 of their production or the hygienist needs to produce 3 times her salary. Calculate this data for the whole hygiene department and then review each hygienist individually. Often, you will find differences. Those who are within range should be praised. Those who are not in range should review their time management, radiology protocols and perio procedures. (See calculation below)

Compare Each hygienist’s salary to her/his production. Production includes all prophies, x-rays (even if an assistant took the x-rays), fluoride, perio. It does not include products such as Sonicare®, bleaching unless the hygienist takes the impressions and delivers the bleach trays from her chair, nor the dentist’s exam fee.

Hygienist’s production ___________ = $ ______________
Hygienist salary for the same time period = $ ______________
Benchmark range is 30 - 33% This Hygienist = _____%
Next, review the periodontal therapy procedure percentage. Unless you have a largely Pedo practice, these following should be your target ratios for a profitable AND high quality care hygiene department.

**Hygiene Perio Analysis I** - ratio of perio production as a percentage (%) of total practice production

Perio production (ADA 4000 code procedures done in hygiene) - Procedure code analysis report 4000 codes done in hygiene:
Perio Procedures total = _____ x 100 = _____%

Total Practice Production

**Benchmark % = 10 %  *** Your practice = ____%**

Sample:
Perio(hygiene) production = $ 10,690
Practice production = $521,346
Benchmark = 10 % of hygiene production *** This practice = 2.1%

**Hygiene Perio Analysis II** - ration of perio procedures as a % of hygiene production

Perio Procedures total = _____ x 100 = _____%

Hygiene Production

**Benchmark range 25 - 30%  *** Your practice = -____%**

Sample:
Perio(hygiene) production = $ 10,690
Hygiene production = $211,740
Benchmark = 25 - 30 % of hygiene production *** Your practice = 5.0%

Anytime is a good time to dig in and review the numbers, procedures and systems to insure the department is vibrant, retaining patients and a profit center rather than a loss leader.

Call me - Jennifer – 770/557/8557 if you find numbers you would like to improve.
Jennifer C. McDonald, has been providing management and technology solutions to dentists for over twenty years. She is Managing Partner of Dental Management Advisors, a dental consulting firm that specializes in assisting dental professionals achieve excellence in leadership and management. Jennifer's experience combined with her attention to detail and long-range planning skills, greatly contributes to the growth and development of her past and present clients – more than 500 located nationwide.

Nationally recognized as a speaker in the area of practice management and technology integration, Jennifer has presented to the American Dental Association, the Yankee Dental Congress, as well as regional meetings and study clubs. She enjoys teaching new dentists how to start-up a practice “the right way” with her annual courses for the Medical College of Georgia and the University of Alabama at Birmingham’s School of Dentistry. Her articles on business and technology solutions have been published in JADA – The Journal of the American Dental Association, Dental Economics, Dentistry Today, Dental Products Report, and Alpha Omegan.

Jennifer is a member of TAG (Technology Alliance of Georgia) and WIT (Women in Technology). From single-doctor start up practices to group practices, her combined management and technology expertise offers a well-rounded approach to improving efficiencies and effectiveness (and de-stressing) the dental practice.