Practice Manager Manual

Raising the Standard in Children’s Oral Healthcare

D4C Dental Brands, Inc. v_06012020
Mission, Vision, Values

**SHARED PURPOSE:**
Helping Children achieve a lifetime of great oral health.

**VISION:**
Raising the Standard in children’s oral healthcare.

**VALUES:**
- Patient first. Advocate for children.
- Outcome driven.
- Engaged & accountable.
- Mutually respectful.
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D4C Dental Brands Messaging

Purpose: This document is intended to give you a brief overview of D4C Dental Brands, Inc. - who we are as a Company (and who we are not). How we present ourselves, how we are perceived and how we act define us as a Company.

In our continued effort to Raising the Standard in Children’s Oral Health Care please make sure you thoroughly understand this messaging to help ensure we represent ourselves correctly and consistently to anyone we interact with currently or prospectively (e.g. affiliates, employees, doctors, vendors, etc.).

WHAT WE DO

- D4C Dental Brands is a DSO or “Dental Support Organization” that contracts (affiliates) with independent Specialist doctor practice-owners to provide support, including all or some of the following:
  - Premises and equipment
  - Human resources services
  - Recruiting support and business development (through Smiles for Life Network)
  - Marketing services and support including intellectual property and brands
  - IT services and support
  - Staffing (other than hygienists)
  - Financial services (accounting and billing and collections)
  - Legal services
  - Compliance support
  - Administrative services
- D4C Dental Brands is the largest and fastest growing specialist DSO focused exclusively on supporting orthodontic and pediatric dental offices
- All of the practices we affiliate with are both doctor owned and doctor operated
- D4C Dental Brands and the practice owners we affiliate with are focused on provided high quality service, and committed to “Raising the Standard in Children’s Oral Health Care”

SMILES FOR LIFE NETWORK

- Smiles for Life Network is the brand under which our recruiting and business development teams engage with prospective affiliates and doctor candidates
- It serves as the recruiting engine for the practice owners who contract with D4C Dental Brands both for new doctors to work in their offices and other potential practices to join their respective practices

HISTORY

- D4C Dental Brands was formed in November 2010 as the original DSO for “Dentistry for Children” in Atlanta, GA.
- We currently support over 125 doctors treating children at 100 offices in 7 different states
WHAT D4C DENTAL BRANDS OFFERS DOCTORS

- Doctors get to practice their Specialty with autonomy and are provided with an opportunity to collaborate with the largest network of Pediatric Specialists in the country
- To be part of a Specialist professional network committed to Quality and Compliance with resources to achieve an unrivalled national reputation
- Doctors work for doctors
- Doctors have the opportunity to focus on their career and enjoy work-life balance
- Doctors have the opportunity to focus on patient care without the worry of administrative duties
- Practice owners are able to offer full time doctors extensive benefits including the opportunity to participate in ownership of D4C Dental Brands

WHAT D4C DENTAL BRANDS DOES NOT DO

- D4C Dental Brands never influences the clinical decision making of its supported doctors (e.g., require doctors to hit set production quotas, mandate the performance of a certain clinical procedure on a patient, etc.)
- D4C Dental Brands does not own nor treat the practices’ patients; the patients and their records belong to the doctor practice-owner
- D4C Dental Brands does not buy practices; we buy non-clinical assets that can help our affiliated practices expand if they choose to merge with other Specialty practices
- Practicing doctors and hygienists are not employed by D4C Dental Brands - they are employed by the doctor practice-owners

VOCABULARY FOR D4C DENTAL BRANDS

Not “our dentists”;
- We affiliate with (or support) dentists and practices; Use “Our supported dentists”
Not “our patients”;
- Use “Patients of our supported dentists”
Not “our practices”;
- Use “Our affiliates” or “Our affiliated practices” or “Our supported practices”

| Patient | People | Provider | Process | Performance |
# Practice Manager Responsibilities Overview

The Practice Manager lives our vision of raising the standard in children’s oral healthcare and is responsible for the day-to-day non-clinical operations and overall success of the dental practice. The Practice Manager ensures that their practice’s affiliated doctors are appropriately supported by capable, trained, engaged team members, who understand and uphold our values and shared purpose of helping children achieve a lifetime of great oral health. The Practice Manager reports directly to the Regional Director of Operations and is supported in his/her role through guidance from the RDO and many resources from the home office.

**The Practice Manager-Doctor Partnership:** Practice Managers are responsible for ensuring the office has the right staff and business systems in place to support the doctors and their delivery of quality care to the patients. A key component to the success of the Practice Manager-Doctor relationship is ongoing, open communication. The practice and doctor are successful when the schedule is optimized. One of the main responsibilities of the Practice Manager is to utilize the business strategies and leverage staff to keep a productive schedule. The Practice Manager must manage doctor days appropriately to be both productive and efficient.

**Business Strategies:** D4C Dental Brands has outlined ‘Best Practice’ business strategies to support the growth and development of our offices. Ensuring the Practice Manager and their staff engage in continuing education and training is imperative for the overall success of the practice. When business strategies are utilized at the highest level, practices thrive. Practices will reach a point of stagnancy or decline when strategies fall by the wayside. Your Regional Director of Operations will guide you in striking a balance of working ‘in’ the practice and ‘on’ the practice.

**Pediatric Practice Growth**

- **Hygiene-Recare Strategy** - The standard of care for the pediatric dental patient includes routine cleanings and exams every 6 months. A productive and effective hygiene schedule is the bread and butter of any pediatric dental practice. Approximately 60% of the practice’s production is generated through hygiene care. When parents/patients understand the need to stay consistent with hygiene care, the practice production thrives and patients achieve a lifetime of great oral health. The best practice percentage of patients retained in hygiene is 85%.

- **Operative-Case Management Strategy** - The other 40% of production is generated from operative care or patients’ treatment needs. Presenting treatment and financial responsibilities with confidence is key to achieving real time case acceptance. Some parents will not appoint at time of service and therefore each practice must implement the case management strategy to follow up.
Orthodontic Practice Growth

- **Referrals** - Our Orthodontic offices continue to grow and thrive when the referrals remain consistent from the D4C Pediatric Offices as well as all external referral sources. Fostering the relationships between our Orthodontic referral sources is key to the success of our Orthodontic business.

- **Ideal Consult** - As referrals remain consistent and grow, so will consultations. Ensuring the treatment coordinator and doctor deliver the Ideal Consult to each patient will increase case acceptance.

- **Orthodontic Recall** - Not every patient is ready for treatment or accepts treatment at time of consultation. The need for treatment will be dictated only by our doctors. Utilizing the D4C Ortho recall strategy will ensure the treatment coordinator is staying in contact with these patients, bringing them back into the practice.

**The Schedule**

The PM is in charge of the office’s schedule. If doctors would like the schedule changed, they must go through the manager to change it. Please consult your Regional Director of Operations before making schedule changes. Working in appointments for same day treatment is encouraged. If patient behavior is a concern, please consult the doctor to determine if same day treatment is appropriate. If the schedule seems too saturated for the doctor, please consult your doctor owner. Details of managing the schedule can be found in the Optimizing the Schedule section. The three main areas of managing the schedule are as follows:

- **Staffing Schedule** - There is a staffing template in place and depending on office productivity, staff may be increased or decreased according to the original ratio.

- **Doctor Schedule** - Doctors are required to provide at least 45 days to request time off; please see the time off request process.

- **Practice Schedule** - Your Regional Director will strategize with you on optimizing the schedule as the practice continues to grow. Some common ways to optimize the schedule are as follows:
  - Utilize school holidays by opening days the practice is not normally open
  - Anticipate growth in the hygiene schedule and build out columns to capture this growth
  - Utilize the huddle to optimize the schedule by providing Same Day Treatment

**Revenue Cycle**:

In partnership with the home office, the Practice Manager is responsible for maintaining a Collections Ratio of 98% and Accounts Receivable Ratio of less than 100% of the month’s production. The steps the practice can take to ensure the success are as follows:
• Collecting/updating patient’s insurance information
• Verifying insurance information is valid for all patients (all offices outside of GA)
• Verifying insurance information is valid for all Medicaid patients (GA offices)
• Obtaining a detailed summary of benefits and documenting in the Practice Management System for ‘add in’ patients
• Reviewing parent’s insurance coverage and patient responsibilities for all treatment needs
• Collecting patient copays and past due balances at time of service
• Submitting insurance claims with complete and accurate information for timely processing
• Working Accounts Receivable reports to collect patient balances
• Managing Dental Xchange or EDS to identify claims with validation errors and resubmitting with updated information
• Establishing a viable financial Orthodontic contract

**Financial Performance (Profit & Loss)**

Many resources go into ensuring our offices continue to grow from a patient, production and collections perspective. The final component to growing a healthy practice is to manage the expenses so that the business maintains a healthy profit to invest in the future. The Practice Manager’s responsibility is to manage the staff and supplies cost.

**Human Resources:**

**Staff Training**

• Proper staff training in the office is a responsibility of the Practice Manager.
• All clinical staff members are required to pass the clinical training tests and be D+4C certified.
• If clinical staff is not properly trained please contact your Regional Director for assistance.
• Staff should be ‘cross trained’ in downtime; this allows for flexibility should the office be down a staff member.

**Team Meetings/Leadership:**

The Practice Manager is responsible for developing a cohesive team that consistently strives to meet the needs of the patients. Daily huddles and monthly team meetings align the staff, resulting in delivering the best possible care. Provided in this manual are guides to holding productive huddles and team meetings.
Marketing:

Internal: The greatest compliment a practice receives is when a parent or professional refers a child/patient to the practice. This speaks to the confidence this parent or professional has in the level of care their child/patient receives. The Practice Manager is responsible for recognizing parents and professionals who refer as well as fostering relationships with potential new referrals sources within the community.

- Front Office Coordinator will check/enter referral at check in
- Assign a team member to manage thank you emails/letters to parents who refer

External: Our marketing department is primarily responsible for the development of our websites and external marketing programs. The Practice Manager is responsible for the following.

- Maintaining consistent communication with the top 5 professional referral sources for both Pedo and Ortho
- Identifying 2 new referral sources and have a reach out plan for these sources to foster future relationships
- Quarterly- Checking the website and providing updates if there are any
- Quarterly- Attending a marketing outreach program (schools dental education, charity events)
- Sending hand written thank you notes for gifts sent to the practices who refer
- Sending doctor to doctor letter for patient’s referred

Reporting and Key Performance Indicators:
For timelines of generating reports and who to send them to, please refer to the Practice Manager Guide & Resources document.

- End of Day Reports and Documentation
- Recap Reports and Documentation
- Labor costs as a % of revenue
- Supplies cost as a % of revenue

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<td>Monthly Hygiene Retention</td>
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| PATIENT | PEOPLE | PROVIDER | PROCESS | PERFORMANCE |
Customer Service

As a Practice Manager you set the tone for the office. Maintaining a positive atmosphere and ensuring the staff engages with patients in an inviting, positive manner is key to delivering excellent customer service. The patients we serve are our customers. Regardless of the field in which you work, good customer service is a must. Customers pay for services that they receive and intend to receive, correct? So, it makes sense that they deserve good service as well. We need to understand that patients have many choices for their dental homes. This means that your job must revolve around providing excellent customer service. To do that, you need to understand what true customer service entails.

To better serve our patients, below are a few refreshers that define Customer Service.

Our Mission: "Helping children achieve a lifetime of great oral health"

1. Be patient
Stay calm and patient while dealing with customers in all situations. If you are calm and your tone is controlled, your customer will feel that you are respectful, that you are listening, and that you value his or her business.

Example: Mrs. Smith, I apologize for not being able to see Sally today, however her appointment was 45 minutes ago and Dr. Charlie has to see the patients that are here for their scheduled appointments. We are happy to try and work Sally back into the schedule around our scheduled patients but if you are unable to wait, we will need to reschedule Sally on a different day.

An upset parent responds better to any conversation when you remain calm and patient during all situations.

2. Be an active listener
How many times do you interrupt someone when they are speaking to you? How many times are you listening to respond rather than listening to understand? Listening to your customers and asking relevant questions is a large part of customer service. Ask questions to clarify anything that may be unclear. Summarize their issue(s) to verify that you have been listening. If you listen attentively and show genuine interest, you are more likely to receive satisfaction from your customer.

Example: Mrs. Smith, I understand your concerns with Johnny needing to return for multiple visits and him missing too much school. I also understand Johnny is in quite a bit of pain and we need to address one of the areas as soon as possible. I would like to help you schedule this appointment as soon as possible at your earliest convenience and try to avoid Johnny missing too much school. We have an early morning appointment available this Thursday so Johnny doesn’t miss too much school or if the afternoon is more convenient, we have an evening
appointment next Monday. Which one of those would work best for you? Also, I see there is a school break coming up, we may be able to complete some of Johnny’s treatment while he is out of school. How does that sound?

3. Have great communication skills

Effective communication skills help with integrity. You must know when to listen and when to speak. Remain focused on what your customer is saying. Make sure your customer understands what is being communicated. Always communicate what you can do before you communicate what is not possible.

Example: Customer wants an appointment for Friday-

Mrs. Smith, we have availability on Tuesday at 4 p.m. or Thursday at 8 a.m. to take care of Johnny’s toothache. Would either one of those appointments work for you? Unfortunately, we do not have availability on Friday.

This is an example of stating the positive before the negative. You have explained what is possible instead of focusing on what is not possible. You will always win with delivering positive information first.

4. Be honest

Be honest and clear with your customer. Honesty influences your customer to remain an existing patient and to invest in your company.

Example: Patient asks, is this going to hurt?

Being dishonest would be No, you will be fine. The truth would be Johnny, it is common to feel some discomfort for the next few days, but you will start to feel better soon after that. I am so glad that we are taking care of this today.

5. Use positive language

Examine the language you use with your customers; it can encourage customers to make a purchase or to run fast. Always use please and thank you. Show respect when speaking to your customer. Proactive and positive words such as “Let me” in place of “Do you” and “We can” instead of “No”, we cannot offer customers what they can have instead of focusing on what all they cannot have.

Example: Customer request to combine treatment for patient-

Mrs. Smith, the good news is that Dr. Charlie has additional time following Johnny’s appointment so as long as he is comfortable; we will combine the upper and lower treatment on the right side. How does that sound?

6. Be an expert on your product
Show the parent and patient that you are the right person with the right expertise to answer their question or to get the information they are seeking. No one knows everything but be the person that goes the extra mile to get the information they need.

Example: Customer doesn’t want fluoride

Mrs. Smith, I would like to explain why we are recommending fluoride for Sally. Fluoride or “tooth vitamins” as we call them, is recommended twice a year by the American Academy of Pediatric Dentistry. Fluoride is a natural cavity fighter. The mineral strengthens the outer surface of teeth (enamel), making it more resistant to the acid that triggers tooth decay. It also rebuilds weak enamel and reverses early signs of decay. Sally has a few areas we are watching and fluoride will only help to prevent those areas from progressing into larger cavities.

7. Manage your time

Time management is crucial in customer service. Be aware of how long each meeting or appointment should take. Being conscious of the time each activity takes will help you stay on track.

Example: Morning huddle turned into a long discussion and patients were brought back late for their appointment.

Mrs. Smith, I apologize for running a few minutes behind starting Sally’s appointment. We will get started right away to ensure you are out of here on time. Stephanie has scheduled Sally’s next cleaning appointment; here is your appointment card.

This is an example of time management for morning huddle. Morning huddle should last no longer than 5 minutes. Anything more should be saved for a meeting during the office lunch hours to avoid compromising patient care time.

8. Look For Ways To Get To Yes!

Whatever we can do for our patients today, we will do it. When there is a willing patient and we can create time in the schedule, we say, “yes” and care for their needs on the day they are in the office. We discover what the patient needs and we look for ways to complete that on the same day they are in our office.

Example: Customer needs treatment

Mrs. Smith, Johnny has two cavities on the upper right. We have availability today at 1:00 to take care of those two cavities for Johnny, this way you don’t have to return for six months and miss anymore work or school. Will that work for you Mrs. Smith?

Vision: “Raising the standard in children’s oral healthcare”

9. End on a positive note
Great customer service is the foundation of any successful organization. It builds relationships, trust and makes everyone’s day better. You need to understand the personality of your customer. Mirroring is a term that is often used when discussing service. If you mirror the personality of the customer in front of you, you can better tailor your conversation and your responses to their needs.

Example: Detailed questions from a person will require detailed responses in order to provide him or her excellent service. Direct questions will require direct responses. Making sure that your customer is satisfied is crucial before the conversation ends. Before you end the conversation, ask customers directly

- Do you have any further questions for Dr. Charlie?
- Have we have addressed your concerns for today?

Always thank the parent/patient for visiting today and that you look forward to seeing them next time.

**Values:**
1. Patients first. Advocate for Children
2. Outcome Drive
3. Engaged and Accountable
4. Mutually Respectful
Best Practice Pediatric Strategies

Recare Strategy

Hygiene Recare

Active Patients

D4C Dental Brands shared purpose is to help children achieve a lifetime of great oral health. Our philosophy for a successful practice places the patient as the most important consideration in any action taken. Nowhere is this more evident than looking at their participation in their overall dental health. In order to maintain an “active” status, a patient must participate in visiting the practice for preventive care at a level necessary to manage their oral health.

To quantitatively measure participation, an active patient is one who has an established hygiene date from 12 months ago to anytime in the future. Great care must be taken to reserve a patient’s next recare appointment before leaving the office to avoid the risk that they may slip into a “past due” status. The effect of this not only hinders practice growth, but ultimately compromises the overall health of these patients.

Active Patient Base Parameters

Each month 3 numbers are generated from the Practice Management System recare module to keep track of the Active Patient Base and Retention. The retention and future due percentages provide insight into the practice’s success rate of appointing the next visit at time of service. The past due percentage provides insight into the practice’s success rate of keeping the patients scheduled. This KPI is calculated in the following manner:

<table>
<thead>
<tr>
<th>Best Practice %</th>
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<tbody>
<tr>
<td>Patients Scheduled (Example Date Range: 1/1/2020 to 1/1/2021)</td>
</tr>
<tr>
<td>Patients Future Due (1/1/2020 to 1/1/2021)</td>
</tr>
<tr>
<td>Patients Past Due (1/1/2019 to 12/31/2019)</td>
</tr>
</tbody>
</table>

# Patients Scheduled
+ # Patients Future Due
+ # Patients Past Due
= Active Patient Base

# Patients Scheduled ÷ Active Patient Base × 100% = Practice Retention Rate
Case Presentation and Management

Case Management Strategy

Although preventive care is the cornerstone of every pediatric dental practice, acceptance on operative care plays a role in its overall success. Some parents are reluctant to agree to the diagnosed care the first time it is presented. Examining case acceptance rates helps provide insight into the opportunities that exist in enhancing real time acceptance. A case presentation and management strategy is necessary to ensure we are giving every patient the opportunity to achieve a lifetime of great oral health. This KPI is calculated in the following manner:

Operative Treatment Completed + Operative Treatment Presented = **Total Operative Treatment**

Operative Treatment Completed ÷ Total Operative Treatment = **Practice Case Acceptance**

Best Practice Case Acceptance = **85%**

Front Office Coordinator

Manages the case management process by utilizing the outstanding treatment plan reports in the Practice Management System.

- Outstanding treatment plans reports are generated in the following manner:
  - On Monday each week, generate the Detailed Treatment Plans (Eaglesoft) or Work in Progress Report (Dental Vision) for the previous week.
  - The date range is specific for each practice: Mon-Fri or Mon-Sat of the previous week.
  - Please see the software instructions document located on the intranet on how to generate reports.
- Please contact parents twice to schedule and document correspondence in the patient’s record and on the report.
- If you speak with the parent or caregiver and they would like to be contacted at a later date; use the Task Manager in Eaglesoft or the Call List in Dental Vision for follow up.
- If Mom, Dad or caregiver does not want to schedule, please ensure they are scheduled for their next hygiene visit so that the treatment needs can be assessed again at that time.
Best Practice Ortho Strategies

Ideal Consult

Orthodontic Ideal Consult

8 Step Consult and Financial Process

1. Develop rapport
   a. Intro call prior to the consult to help develop rapport and build relationship
   b. During the consult discuss appointment reasoning. What are their chief concerns?
   c. Was this a dentist referral? Read over the dentist referral with the parent to make sure they understand the dentist’s concerns.
   d. Talk to the child and ask questions about school or hobbies, making them feel special and putting them at ease.
   e. Ensure the Panorex is displayed on the TV and show the patient/parent with excitement “Have you ever seen yourself like this before?” or “Have you ever been on TV before?”

2. Share the excitement
   This might be the patient’s first time seeing an orthodontist, so we want them to be excited and know we are on the same team to achieve the perfect smile!
   a. Ask the patient: “Are you excited about getting braces? Do any of your friends have braces or are you going to be the first of your friends to get them?”
   “Have you already picked out colors you may want?”
   b. Hand the parent the Doctor bio placard and say, “Did you receive this with your new patient paperwork in regards to Doctor _____?” and then briefly go over the quality care your doctor will provide.

3. Debrief the Doctor prior to exam
   a. Treatment Coordinator provides the status of the patient to the Doctor before entering the room: Is this a new patient, shared patient with D4C or from an outside dentist, re-exam, are there any medical concerns, date of the last cleaning, who referred them and is this a second opinion
   b. Provide any sibling/other family members information if they are patients
   c. Chief concern of parent/patient
   d. Have a printed copy of the Panorex for Doctor to review
4. **Doctor handoff to the Treatment Coordinator post exam**
   
   a. Ideally the Doctor asks the parent/guardian if they have any questions and then says “I am going to leave you in good hands with _________ to go over any questions with costs relating to the treatment and I look forward to getting to know you ______ and your family.”

5. **Parent & patient acknowledgment after the consult**
   
   a. **Make sure the patient understands what our doctor is recommending for them.** (They might not understand dental terminology, make sure you simplify it for them)
      
      i. “Dr. ____ is recommending 24 months of upper and lower braces with an expander. Let me show you what this will look like.”
   
   b. Explain the treatment steps and show the parent and the patient by using models to make sure they know what to expect and what the appliance(s) or braces look like. (Ex. If the patient is going to need an expander then braces, you would show them a model with separators, a model with an expander, a model with braces and then a model with retainers)
   
   c. Before transitioning to the financial piece, ask the parent if they have any additional questions regarding treatment needs.

6. **Present the fee with confidence**
   
   **Option 1 - Self Pay**
   
   a. “The total for your treatment is $4,700.” Present the PIF discount, pause, and present the affordable monthly option.
   
   **Option 2 - Insurance**
   
   b. “The total fee for 24 months would normally be $6,000. However, since we are contracted with your insurance, your total cost of treatment is $4,000. Your insurance is estimated to pay $1,000. And your portion would be $3,000. Would you like to pay your portion of $3,000 up front or would you like for us to look at affordable monthly payment options?”

7. **Objections to overcome**
   
   a. If there is hesitation in starting the same day or scheduling the appointment to start, discuss where the concern lies, is it the total cost? Observe body language of the parent/guardian and do not be afraid to say, “Tell me what you’re thinking” or “Let’s discuss what is keeping you from getting started today or scheduling to start”
   
   b. Let them know that we have competitive fees
      
      i. Explain to them that many orthodontic offices will accept their
insurance, but will not have the same great price that we have negotiated with their insurance company.

c. If they want to discuss with the spouse and/or other parent, encourage them to call now and offer to step out of the room for privacy.

d. Offer applicable same day discounts

8. Close the case today

a. End your consult on a great note! Let them know again, that we have scheduled the consult with enough time to begin treatment.

b. The Treatment Coordinator needs to know what the schedule looks like and what the day will allow, so that the case can be closed effectively. Ideally this is discussed in the morning huddle.
   i. If the schedule is extremely busy or you know that the office is short staffed, focus on selling the records appointment as your first step.
      “We have blocked out enough time today to begin treatment.” “The next step will be the records process, collecting your initial payment and completing the paperwork.”
   ii. If the schedule allows for both records and braces to be placed on the same day, focus on the excitement of getting started today.

c. If parent/guardian is unwilling or unable to begin treatment today; encourage scheduling an appointment to start treatment within the same month as the consult, to ensure you’re on track in meeting your monthly goal.
   i. If they will not schedule, set a calendar date and time to make a follow up call with parent/guardian before they leave the office

d. If unable to reach parent/guardian on the scheduled follow-up date, continue to follow the will call back process as determined in your region.
Ortho Quick Reference Guide

❖ Consults
   → AAO recommends having the first screening at age 7
   → Pedo office staff schedules all qualified consults at check out
   → Consults are between 30-60 minute appointments (unless otherwise instructed)
   → All consults are at no cost to the patient (including Panorex X-ray if needed)
   → Ideal patient is clean and cavity free, recently completed a Prophy – ready to start orthodontics
   → No referral form needed
   → Utilize the D4C Ortho tracking referral method

❖ Steps in process for the patient
   → Referral from office and placed on tracking sheet
   → Schedule consult
   → If ready to begin, Ortho team will schedule complete records (Ceph X-ray, photos, impressions or scan)
   → Begin treatment – appointments and process managed by the Ortho team
   → Monthly adjustment visits typically vary between 4 week, 6 week or 8 week intervals - Typical treatment length is 24 months
   → Finish treatment – remove braces and deliver retainers

❖ Flexible payment plans available
   → Monthly auto draft required if not paid in full
   → Can use Care Credit
   → Commercial insurance benefits can be used and billed
   → Flex spending and HAS cards are accepted
   → Fees are based on the length and type of treatment and differ patient to patient
   → Payments are due each month and do not correlate with office visits

❖ Handling Office Emergencies
   → WAX, WAX, WAX – Know where it is located in the office and its available at stores in the toothpaste area
   → Triage call – most Ortho issues can be treated by placing wax on the area until the next appointment
   → Forward the patient to the Ortho team for further review
   → Rarely should you have to see a patient in the office

❖ Ortho Assistants
   → Orthodontists give instruction and the assistant will do the majority of the work
   → Need a good balance of experienced assistants vs trainees
   → Teams may be required to travel

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Pedo to Ortho Referral Process

→ Pedo team identifies potential Ortho referral patients as part of chart prep
→ Pedo Treatment Coordinator brings it to the doctor’s attention at patient’s visit
→ Pedo Doctor refers patient to Ortho
→ Pedo Treatment Coordinator creates referral in Dental Vision/Eaglesoft and reviews with parent or Legal Guardian
→ Upon check out, the Pedo Front Office Coordinator schedules the consult
→ In combo offices, the FOC offers to walk parent or legal guardian to the Ortho side for an introduction
→ Throughout the day, the Pedo TC documents the referrals and scheduled visits to complete the Ortho Referral Tracker at the end of the day

Referral Follow Up: Pedo to Ortho

→ Ortho makes three attempts to contact patient
→ TC updates the Google Doc after each attempt
→ After three attempts, TC sends patient information to the Practice Manager
→ Practice Manager will ensure a note is added to the patient’s chart
→ At the next recall appointment, the Pedo doctor will be informed of previous referral and efforts to contact/schedule. (This should be noted on router during chart prep.)
→ Ortho consultation will be recommended again
→ Pedo TC will follow the same process as above or make notes if Ortho is not desired
Optimizing the Schedule

**Pediatric**

- Educating patients/parents on the importance of maintaining hygiene care
- Achieving the daily goal of 95% of patients leaving with the next appointment scheduled
- Creating an urgency with patients/parents on completing operative treatment in a timely manner
- Utilizing the huddle to identify and capture Same Day Treatment opportunities
- Firmly adhering to the Broken Appointment Policy
- Ensuring the staff works the Recare and Case Management strategies

**Orthodontic**

- Maintaining and creating new referral relationships
- Ensuring Treatment Coordinators are delivering the Ideal Consult
- Utilizing the huddle to capture Same Day Treatment opportunities
- Educating patients/parents on the benefits on coming in for growth and development checks
- Firmly adhering to the schedule template
- Ensuring Treatment Coordinators are consistently contacting Pending/Ready patients
- Ensuring Front Office Coordinators are working the Recall strategy

**Reporting Playbook**

D4C Dental Brands has outlined ‘Best Practice’ business strategies to support the growth and development of our offices. Ensuring the Practice Manager and their staff engage in continuing education and training is imperative for the overall success of the practice. When business strategies are utilized at the highest level, practices thrive. Practices will reach a point of stagnancy or decline when strategies fall by the wayside. Your Regional Director of Operations will guide you in striking a balance of working ‘in’ the practice and ‘on’ the practice. Many resources go into ensuring our offices continue to grow from a patient, production and collections perspective. The final component to growing a healthy practice is to manage the expenses so that the business maintains a healthy profit to invest in the future. This section of the manual provides tools for the Practice Manager to grow their businesses from all of these aspects.
**Schedule Planning Guide**

As a Practice Manager you own your office schedule. The schedule is one of the most important components to the overall success of the office. It drives the type of day the office has from a workflow and productivity perspective. Having a robust schedule is the daily main objective. The Practice Manager should have a calendar plan to open for school breaks and holidays, as these are our busiest days.

**Office Name: _________________________ 2019 Scheduling Guidelines/ Yearly Planning**

**January**

21st MLK Day: add hygiene columns to increase access to patient care; if office is normally closed, attempt to open this day
Check local school schedules to see when holiday break is over (most have at least Jan 2nd and 3rd off), add hygiene columns to increase access to patient care

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<tbody>
<tr>
<td><strong>School County</strong></td>
<td>School Testing Dates (if applicable)</td>
<td>Dates School is closed</td>
<td>Action Plan</td>
</tr>
</tbody>
</table>

**February**

Check for winter break dates, add hygiene columns to increase access to patient care; If office is normally closed on a day that school is out, attempt to open that day
Check with local school schedules for testing dates, offer 3-6 year olds to fill testing dates
All offices closed 2/9

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Pedo Daily Production Report Instructions & How to Guide

Many factors contribute to the whether or not an office meets their anticipated monthly revenue, including: Practice Retention Rate, Patient Satisfaction, Staff (including doctor) Morale & Engagement, Number of New Patients, Adherence to Company Policies & Procedures, Process Improvements, and, Clinical & Operational Excellence. The production report that is sent by accounting daily helps you to track your monthly revenue.

Step 1:

Follow these steps to ensure accurate tracking of your offices production:

1. On or before the 20th of each month, email the accounting representative the # of days your office is working.
   a. ½ days that are being worked should be typed in as .5
2. If your # of working days changes mid-month, email the appropriate accounting representative (CC RDO) to inform them of this change so that they can adjust the production report.

The spreadsheet will automatically calculate your total # of work days.
Step 2:

**Review the daily production report when it is emailed from accounting.**

To ensure we are looking at accurate data, verify the following:

- Last Year Net production is accurate (use your software to verify)
- # of working days this year and last year are accurate
- Net production each day is accurate

If any corrections should be made, email the appropriate accounting representative and CC RDO.
**Working days**

Always ensure the # of working days is correct

<table>
<thead>
<tr>
<th>Date</th>
<th>Office Name</th>
<th>Location</th>
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<tbody>
<tr>
<td>February 12, 2018</td>
<td>Des Moines</td>
<td>PM Name</td>
</tr>
<tr>
<td>February 13, 2018</td>
<td>Des Moines</td>
<td>Kubovish</td>
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<tr>
<td>February 14, 2018</td>
<td>Des Moines</td>
<td>PM Name</td>
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<tr>
<td>February 15, 2018</td>
<td>Des Moines</td>
<td>Kubovish</td>
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<td>February 16, 2018</td>
<td>Des Moines</td>
<td>PM Name</td>
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<td>February 17, 2018</td>
<td>Des Moines</td>
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<td>February 18, 2018</td>
<td>Des Moines</td>
<td>PM Name</td>
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<td>February 19, 2018</td>
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<td>February 20, 2018</td>
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<td>PM Name</td>
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<td>February 21, 2018</td>
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<td>February 22, 2018</td>
<td>Des Moines</td>
<td>PM Name</td>
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<td>February 23, 2018</td>
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<td>February 24, 2018</td>
<td>Des Moines</td>
<td>PM Name</td>
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<td>February 25, 2018</td>
<td>Des Moines</td>
<td>Kubovish</td>
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<td>February 26, 2018</td>
<td>Des Moines</td>
<td>PM Name</td>
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<td>February 27, 2018</td>
<td>Des Moines</td>
<td>Kubovish</td>
</tr>
<tr>
<td>February 28, 2018</td>
<td>Des Moines</td>
<td>PM Name</td>
</tr>
</tbody>
</table>

**Daily net production last year vs. this year**

- **February 12, 2018**
  - PM Name: 112,093
  - Kubovish: 198,028

**Net production for each day worked**

- **February 12, 2018**
  - 112,093
  - **February 13, 2018**
  - 117,053
  - **February 14, 2018**
  - 125,073

**Bad Debt Reserve calculation:**

- Collections/Net Production = Collections Ratio
- Example: Practice’s Collections Ratio = 97%; BDR = 3%

**Total MTD net production**

- February 2018
  - Total Production: 204,161.81
  - Budget for the month: 182,390.86

**Variance between budget and production**

- February 2018
  - Variance: 21,771.95

**Projected production**

- February 2018
  - Projected Production above PM Budget: 35,000

**Average daily production to meet budget**

- February 2018
  - Average Daily Requirement to Achieve PM: 8,000
Supply Budget Worksheet

Pedo Supply Budget Management Best Practice

- Practice managers are solely responsible for managing the supply budget worksheet. All orders should be reviewed by the practice manager prior to being placed.
- At the beginning of the month, enter your monthly budget/forecast into the "current month projected production".
- Your budget for office supplies and dental clinical supplies will automatically populate:
  - The benchmark for office supplies is .5% of revenue.
  - The benchmark for dental supplies is 4% of revenue.
  - **We will always order the clinical supplies our doctors need regardless of budget.**
- Each time an order is placed and you receive an invoice, add the invoice and total order amount.
- At the bottom of the spreadsheet, you will see your remaining budget and total orders as the month goes on and orders are placed.
- As the month goes on, you must update the current month projected production with the projected production that is on the production report that is sent from accounting every day.

Your monthly progress will show where you are in comparison to the 4% benchmark.

Enter the vendor you are ordering from, and the amount of the order and amounts and your remaining budget will populate.

Enter your current month projected production. This can be found on the production report from accounting.
Profit & Loss Statement

Training Documentation:

Profit & Loss

KPI Data

Practice Managers will receive practice metrics from the Pediatric scorecard in the following manner:

Dental Vision and Eaglesoft Offices: Compiled by your Field Support Manager through Qlik Sense.

All other offices: Practice Manager will report data from the PM data template and email to your FSM by the 5th of the month. The PM will have access to the Orthodontic metrics through Gaidge.

Pediatric:
Hygiene Retention
New Patients
Case Acceptance
Collection Ratio

Orthodontic:
Starts
Case Acceptance
Net Contract Value
Referrals
Exams
Human Resources

Welcome to D4C Dental Brands, Inc. The human resources department is committed to developing top talent by valuing, engaging and supporting a diverse workforce. We encourage Practice Managers to partner with us on any HR related issue including, but not limited to, performance management and terminations, leaves of absences and accommodations, worker’s compensation, recruiting/onboarding and more!

Specifically, with guidance from human resources, the Practice Managers are expected to:

- Partner with HR when unclear or unsure about a policy or issue.
- Demonstrate behaviors that are consistent with the company’s standards of conduct, shared purpose, vision and values.
- Complete LMS trainings in a timely manner.
- Encourage and foster employee engagement.

You can access all items relating to HR on the intranet site at https://d4chr.com/.

Specifically, you will find resources and guides to the following items through these links:
- Employee Engagement Survey https://d4chr.com/employee-engagement-survey/
- Utilizing WebApps https://d4chr.com/thrivehr/
- Navigating Taleo https://d4chr.com/thrivehr/
- Performance Management and Termination https://d4chr.com/thrivehr/

Pediatric Team:
- Assistant Practice Manager
- Front Office Coordinator
- Treatment Coordinator
- Dental Assistant
- Hygienist
- Hygiene Assistant

Orthodontic Team:
- Treatment Coordinator
- Front Office Coordinator
- Clinical Lead
- Orthodontic Assistant
- Records and Sterilization Tech
Team Leadership

Huddle

At D4C, we believe that one of the cornerstones to successful Practice Management is to conduct an effective Daily Huddle. This allows the entire team to fully prepare for each patient, to anticipate potential issues and to maximize the schedule. Huddles provide the structure needed for proper communication that aligns with our values of putting patients first, being outcome driven, engaged and accountable and mutually respectful. The team should meet for 15 minutes every morning.

A successful Daily Huddle requires preparation and research before the team comes together in a planned purposeful fashion. The Daily Chart Audit is the necessary research process that prepares the team to communicate effectively with the parent and patient. Our goal is for every patient to leave ‘complete’. In the Pediatric offices this means they scheduled their next recare and operative visit (if applicable), they paid their patient portion of treatment, they understand their co-pay for their next visit and they had an excellent patient experience. In the Orthodontic offices this means they are scheduled for appliance placement, recall or observation visit, they understand the terms of their contract, their account is current and they had an excellent patient experience. Items to review to prepare for huddle are as follows:

Pedo- Patient

- Radiographs to be taken
- Adhering to their recare interval- 3, 4, 6 months
- Outstanding treatment needs
- Outstanding patient balance
- Medical/Special needs

Pedo- Office/Schedule

- Same day treatment availability
- Emergency time availability
- Other strategies to fulfill open time (recare reports, quick call list, etc.)

Ortho- Front Office Coordinator

- Review daily collections
- Send emails to patient/parent regarding balance and/or or prepare to discuss day of appointment at check in

Ortho- Treatment Coordinator

- Intro calls to all new patients the day before the consult
- Know your monthly goal and current status of where you are with your goal
Ortho- Clinical Lead/PM

- Review the schedule and make notes on # of consults, starts, debands and bondings
- Prepare to discuss any ‘difficult patients/parents/scenarios with the team to have them prepared for the day
- Make sure the office is adequately staffed for expected patient volume

Monthly Team Meetings

The Team Meeting is a S.P.E.C.I.A.L. time each month that the team devotes to working on their office.

S  Success Stories (Choose 3 team members per meeting) 10 minutes

➢ Team members come to meeting prepared to share an office success story that has occurred since the last meeting.

P  Progress on TAP from last month (Choose 3 team members per meeting) 10 minutes

➢ Team members are responsible for completing their personal TAP (Team Action Plan) before the meeting. This time is allowed to report the progress of each item.

E  Evaluation of office to goals- 20 minutes

➢ Review retention % and past due %
  o Compare to previous month
  o Did the office improve, if not, what actions need to be taken?
➢ Review case acceptance
  o Compare to previous month
  o Did the office improve, if not, what actions need to be taken?
➢ Review collections ratio
  o Compare to previous month
  o Did the office improve, if not, what actions need to be taken?
➢ Review Starts vs. Budget
  o Did we make goal?
  o If not, what actions need to be taken?

C  Communication- 5 minutes

➢ Announcements
➢ Information from the Home Office
➢ Upcoming events
➢ Solutions to concerns
Identify opportunities in the schedule for the current month - 5 minutes

- Is the schedule optimized?
- Is there a need or opportunity to add time/days?

Actions to be taken (Each person report) - 5 minutes

- Each team member to repeat what is on their TAP and the date by which it will be completed.

Lead - 5 minutes

- PM to inspire the staff to provide excellent care by reviewing the company's mission, vision and values

D4C Training & Development Team

Training & Development

Our training team is comprised of Field Support Managers and Position Mentors. The program is designed to lay the foundation for all field staff to gain confidence in their positions and be fully supported as they embark on delivering excellent patient care and customer service. The comprehensive program consists of self-study, e-modules, hands on training and assessments. All training resources can be accessed through the link above. Our Field Support Managers will organize training sessions per region by utilizing weekly new hire reports.

Marketing

Marketing

Welcome to the D4C Family! The marketing department is excited to work with you to bring new patients into your office. We will be responsible for your visual, digital and mass media presence, including the construction and maintenance of your website, digital advertising, reputation management, creative materials and placement of radio, billboard and/or TV advertisements. There will also be many tasks you will need to do to help with marketing at the local level. Our expectation is that you will develop and maintain relationships with your patients, referring doctors and the community by visiting and thanking professional referral sources, participating in community events and creating partnerships with local businesses and schools. There is a wealth of detailed information in the digital Marketing Playbook to assist you with these local tasks.
Specifically, with guidance from the Marketing Playbook, the Practice Managers are expected to:

- Provide exceptional service and attention to patients and their families to increase word-of-mouth referrals and boost office reputation every day!
- Send doctor to doctor letters for each patient referred to your office at the end of each day.
- Track and manage referral sources of all new patients in the practice management system for monthly reporting and analysis.
- Maintain consistent communication with the top 5 professional referral sources for both Pedo and Ortho by visiting at least one office each week. (Detailing)
- Participate in social media by sending pictures of your office to the Marketing Department to post each week.
- Identify 2 new referral sources each month and have a reach out plan for these sources to foster future relationships.
- Check the website at the beginning of each Quarter and provide updates to the Marketing Department if needed.
- Identify and participate in a marketing outreach program (I.e. schools, festivals or charity events) each quarter.
- Respond directly to patients who post negative reviews as needed.
- Keep an inventory of print and promo items needed for participation in the above. Order items when needed.

**General Office Policies and Procedures**

**Cell Phones**
- Cell Phone are not allowed on the clinic floor unless it is a company phone.
- Only company cell phones are allowed on the clinical floor.
- No pictures or videos may be taken without the permission from a doctor or management.

**On Call Policy**
- All doctors considered full time will take on call.
- These doctors will rotate one week on-calls, Monday-Sunday.
- Doctors are responsible for answering their phones during this period. It is the doctor’s responsibility to find a replacement should they be unable to perform their on-call duties.
- On call rotation is the doctor’s sole responsibility.
- A “brief” clinical note should entered for patients in their primary location to explain the emergency call.
- It is up to the doctor to decide which practice they will see the child in, not the parent.
- ON CALL IS ONLY FOR PATIENTS OF RECORD not for patients who are not currently being seen at a D4C location.

| PATIENT | PEOPLE | PROVIDER | PROCESS | PERFORMANCE |
Protocol

- If the on-call doctor feels the patient needs to be seen, they should contact the assistant who is assigned to on-call for that week.
- **Under no circumstance should a doctor see an on call patient in an office without an assistant.**
- It is under the doctor’s discretion to decide necessity of treatment.
- Situations may call for the on-call doctor to do one or more of the following:
  - Recommend the patient go to the ER for treatment
  - Prescribe antibiotics
  - Prescribe pain medication
  - A conversation on the phone with the parent
  - A follow up appointment in one of our clinics
  - See the patient in one of our clinics, first thing the next working day

*If the patient is referred to an office please contact that office manager so that they know the patient is coming in and why they are coming.

Office Closure Protocol

**Closure Approval Process:**

- PM and Doctor collaborate to assess the need to close office based on weather conditions
- PM communicates with RDO on plans to close and makeup strategy
- Doctor owner and RDO communicate to make final decision on office closure; office closures usually mirror the school districts closing decision (with collaboration with Practice Manager and Doctor; staff and patient safety are #1 priority)
- Days must always be made up within the same month (certain exceptions may apply)
- PM to inform doctors
- PM will notify Marketing department and call center to update all marketing channels
• PM should notify staff, patients, communications center and any other applicable
  departments (PM and office is responsible for contacting patients. The Communications
  Center can sometimes assist.)
• The marketing department will publish all closings on social media and websites.
• PM/RDO inform D4C Leadership team of all closures and makeup days

**Office Next Steps:**

• Begin rescheduling patients. Utilize patient communication system to send mass
  emails/ texts to patients
• Engage the communications center to assist in moving patients if needed
• Display clinic signage form on the door of the office
• Add a forwarding or inclement weather message to the phone

**Office Preparation**

• All electronic equipment (computers, modems, monitors, copiers, UPS systems, etc.)
  should be turned off and unplugged.
• Electronic equipment should be moved away from windows (if feasible) and covered
  with plastic sheeting and plastic bags.
• Move electronic equipment to table tops / higher places when and if appropriate for
  flooding situations.
• Essential files should be placed in file cabinets and secured. Do not leave valuable
  materials on desks or shelving.
• Personal belongings of value should be taken home.
• All office doors must be closed and locked.

If we have the threat of freezing temperatures overnight:

• Be sure to leave at least one faucet dripping overnight (hot and cold). When pipes
  freeze, it isn’t necessarily the ice that does damage, it’s the pressure in the
  lines. Leaving the faucet dripping relieves pressure and lowers the potential for pipes
  bursting.
• Wherever we have water pipes inside cabinets (under sinks, operatories, kitchens, etc.),
  it helps to leave the cabinet doors open so the room heat assists in warming the pipes.
• If your mechanical room is outdoors (outside entrance rather than from inside your
  suite), or if it has an outside wall, leave any available light(s) on. Even minimal heat
  produced by lights is better than no heat at all.
• Stay in tune with weather forecasts so you can be proactive.
Please take special precaution when entering in the mornings, keeping a watchful eye for any ice in your path and around the entry. Please inform the facilities department ASAP of any facility issues you may encounter as a result of the inclement weather.

**GA/SC Offices:** If you need Ice Melt or salt delivered to your office, please contact Troy or Sue at Supply & Save. It's always good to keep a couple bags on hand for future surprises. Supplies in the southern regions are historically low, so getting them ahead of time is important.

Ice Melt (or other brands) can typically be found at Big Lots, Home Depot, Lowes, Wal-Mart, Ace Hardware, etc. and are usually less than $10/bag, so a P-card will cover in case of emergency.

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**Compliance Program Overview**

D4C Dental Brands, Inc. (the “Company” or “D4CDB”), together with its Affiliated Practices who have adopted this Compliance Program, are dedicated to establishing and maintaining an effective compliance program in accordance with guidance published by the Office of the Inspector General of the U.S. Department of Health and Human Services (the “OIG”). Accordingly, the Company has developed and adopted a Compliance Program designed to uphold the highest ethical, quality and compliance standards as we fulfill our mission of raising the standard in children’s oral health.

We expect all employees, officers, directors, agents, representatives, and consultants, including those of the Affiliated Practices who have adopted this Compliance Program, to comply with the Company’s compliance-related policies and procedures as well as all of the local and national laws, rules and regulations applicable to the Company’s operations.

The Company’s Compliance Program is rooted in the seven elements of an effective compliance program as advised by the OIG. These seven fundamental elements of our compliance program are summarized below.

1. **Written Policies and Procedures:** The Company has developed and issued a number of written compliance-related policies and procedures, including the Company’s Code of Conduct, HIPAA Policy, and the Employee Handbook. These policies and procedures provide guidance to employees on how Company representatives are expected to interact with patients, payers, referral sources, vendors, and each other. These policies assist the Company in detecting, correcting, and preventing fraud, waste, and abuse, and lay out the Company’s expectation that its representatives act ethically and with honesty, integrity, and respect in everything they do. All employees are required to review, understand, and comply with the Company’s policies and procedures.
2. Compliance Leadership: Andy Lyness, serves as the Company’s Chief Compliance Officer (the “Compliance Officer”) reporting to the CEO. The Compliance Officer is empowered to exercise independent judgment and is responsible for developing, monitoring and otherwise administrating the Compliance Program, and serves as the focal point of the Company’s compliance activities. The Company also has developed a Management Compliance Committee comprised of the Compliance Officer and members of the Company’s senior management to assist the Compliance Officer with review, revision and implementation of the Compliance Program, including developing and executing an annual Compliance Plan.

3. Education and Training: The Company routinely provides training and education to its employees and representatives on their compliance-related responsibilities under the applicable laws and regulations as well as the relevant Company policies and procedures. D4CDB is committed to taking all necessary steps to effectively communicate the Company’s compliance expectations to all Company employees. The Company regularly reviews and updates its training programs. In addition to providing regular live and electronic-based trainings throughout the year, specialized and targeted trainings will be provided to employees or groups of employees on an “as needed” basis.

4. Communication: The Company is committed to fostering dialogue between management and employees. The Company encourages employees to talk to supervisors, managers, the Legal Department, the Compliance Officer, any member of the Management Compliance Committee or other appropriate personnel about suspected illegal or unethical conduct or violations of the Company’s policies. D4CDB has adopted both confidentiality (to the fullest extent possible) and non-retaliation policies in the event an employee is concerned about a potential violation. Company employees may also use the Company's anonymous Compliance Support Line by calling 844-815-8229, or by accessing the web-based version of the Support Line through the Company’s intranet website.

5. Auditing and Monitoring: The Company’s Compliance Program includes efforts to monitor, audit, and evaluate compliance with the Company’s policies and procedures. The Compliance Officer, in conjunction with the Management Compliance Committee, will continually develop auditing and monitoring activities according to a variety of factors, including changes in business practices, new regulatory requirements, and alerts issued by OIG.

6. Enforcement and Appropriate Disciplinary Action: The Company’s compliance policies include disciplinary policies that set out the consequences of violating the law or the Company’s Compliance Program. The Compliance Officer or designee will investigate reports of suspected violations brought to the Company’s attention and, with input from other members of the Management Compliance Committee, will take appropriate disciplinary action to address inappropriate conduct and deter future violations by employees or third parties Company representatives.
7. **Response and Prevention:** OIG recognizes that even an effective compliance program may not prevent all violations. Accordingly, the Company’s Compliance Program requires a prompt response to potential violations of the law or Company policy. Additionally, the Company will take appropriate disciplinary action as a result of compliance violations, will assess whether additional policies, practices, or internal controls are needed to prevent future violations, and will make adjustments to the Company’s Compliance Program as necessary.

**Overview of Compliance Liaison Program**

**Designate Single Compliance Liaison at Each Office with Compliance Responsibility**

- Practice managers will be designated the Compliance Liaison for their respective offices.
- Allows the compliance program to scale with a growing organization
- Provides for a standardized communication channel regarding compliance issues.
- Creates clear accountability and responsibility for compliance, and empowers each office to adhere to Company’s high compliance expectations.
- Compliance Liaison will identify a clinician (all departments) who will support clinical related compliance initiatives; called a Clinical Compliance Coordinator.

**Compliance Liaisons’ Responsibilities**

- Attend quarterly conference call to discuss compliance-related topics.
- Schedule quarterly compliance meeting with staff to review slides discussed during quarterly conference call; email sign in sheet to compliance@d4c.com
- Fill out monthly questionnaire from Formstack, acknowledging that key compliance related expectations are being met (web based form-will be emailed by the Compliance Department).
- Host quarterly facility reviewer from corporate team and implement any identified remediation.
- Serve as the compliance point of contact for office throughout the year- for example: help office implement new compliance policies, communicate with compliance team regarding questions or issues that arise, etc.
- Complete the (LMS) Compliance Liaison online training.
Communications Center

The Communications Center communicate with our parents and patients in various manners. In addition to scheduling appointments for new and existing patients for both pediatric dentistry and orthodontics, the Communication Centers also do the following:

- Respond to Live Chats
- Handle online appointment requests
- Reach out to parents/patients regarding referrals to the Orthodontist
- Manage and schedule recalls in collaboration with office staff
- Assist in appointment confirmations
- Process the return mail for Pedo and Ortho
- Manage patient engagement tools (Demandforce, Lighthouse, and Sesame)
- Schedule financial consults

The Atlanta Communications Center will continue to support the Georgia and Lexington offices. The Charleston Communications Center will continue to support the Charleston area offices. Our affiliated offices in other states do not utilize the Communications Center.

Patient Communication Software

The organization primarily utilizes Demandforce and Lighthouse 360 for our pediatric offices and Sesame for our Orthodontic offices for patient reminders, confirmations, appointment requests and recall processes.

Daily items to manage are as follows:

- Check Last Sync Date and Time
- Alert Demandforce with server access if there is a sync error
- Manage Incoming Text Messages
- Manage Incoming Appointment Requests