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HEALTH CARE

Dentists drill into consumer services: Extended hours, insurance plans and more

“What does a dental visit look like in 10 years? I do think it’s changing.”

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Dentists have always taken care of patients’ teeth, but not always their patients' time, money or overall health needs.

All of that is changing in the Denver area, however.

Driven by shifts in population and by the need to reach patients who ignore their oral health, local dentists are becoming more consumer-oriented and offering services that formerly were not in their domain.

Practices — especially the national dentistry chains that increasingly are operating in the area — are offering their own insurance plans, extending their hours and giving discounts for cash payments in a bid to attract more patients into their chairs.

The moves are, thus far, paying off in a growth in customers for these innovative firms. And they are leading dental insurers and foundations to experiment with new relationships with primary-care providers as insurers wander outside of their



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Vidhyalaskshmi Sampath in the BrightNow! clinic in Parker.

traditional business-to-business focus and become more attuned to business-to-consumer relationships.

“Dentistry is changing drastically,” said Jeffrey Adams, managing director of Phoenix-based Risas Dental and Braces, which has opened five locations since entering the Denver market in 2013. “This is a 20- or 30- or 40-year trend, not a 10-year trend.”

Even as most industries around them faced a wave of consolidations over the past 10 years, dentists had held remarkably tight to a traditional business model. As of mid-2016, only 12 percent of dental offices were operated by companies with 10 or more sites, and many of those locations operated on models with traditional 9-to-5 medical-office hours.

This was the first place that chains new to Denver saw opportunities.

Risas, for example, came in with clinics open from 9 a.m. to 8 p.m. Monday through Saturday and offered cash-pay discounts and payment plans to customers without insurance — a group that encompasses 30 percent of Colorado residents.

And knowing that many of the urban dwellers who lacked regular dental practices were part of the growing Hispanic population, the company required 80 percent of its dentists to be bilingual, as well as 100 percent of its support staff, Adams said.

Bright Now!, a subsidiary of California-based Smile Brands Group Inc., had similar plans in attracting those who’d neglected oral care, so it emphasized its longer hours and also the limitless care it offered through its own insurance plans.

It also recruited recent graduates of dental schools who were saddled with some \$400,000 in debt and had no desire to go the traditional route of trying to open and promote their own business while settling into full-time practice, said Dr. Vidhyalakshmi Sampath, president and principal with the company who oversees 14 area offices.

“We also have multiple payment options,” said Sampath, who served as a contract dentist with the U.S. Army before joining Bright Now. “It definitely opens our eyes to the different aspects of the business of dentistry.”

Sampath said she believes that the barrage of television commercials in recent years for teeth-whitening products has made Americans more attuned to their oral-health needs.

But she also feels that dentists are getting a boost from the surge in insured Coloradans ever since the federal Affordable Care Act made it a requirement for all individuals to purchase insurance in 2014. Dental insurance was not a mandate through that law, but many people who were forced to buy individual plans especially purchased those offering some care for their teeth.

Delta Dental of Colorado, the state's largest dental insurer, watched carefully the trends in how people were getting dental insurance and how they were accessing dental care. And the company has launched several new business initiatives because of its observations, said Helen Drexler, who took over as the company's CEO in December 2016.

From a strictly business standpoint, the 1.3 million-member organization has shifted more of its efforts to offering individual, direct-to-consumer plans, believing it has a lot of room to grow in that space. And at the beginning of 2018, it began selling plans specifically for children, offering 100 percent benefits for kids up to age 13 on non-orthodontic services.

But Drexler also saw the growth of interest in dental plans as a chance to link dentists more with primary-care doctors in an effort to make dental care a more integrated part of overall health care.

She is talking with industry groups about direct referrals by dentists for specific care, or even about the ability of dentists to give flu shots or other common procedures in an effort to make sure that time-strapped consumers can receive all the care they need.

"What does a dental visit look like in 10 years? I do think it's changing," Drexler said. "This dental-medical integration is real."

Company officials are convinced of that after the Delta Dental of Colorado Foundation launched a project in 2015 in which it integrated dental hygienists into 16 primary-care practices in order to expand access to dental care.

Allison Cusick, executive director of the foundation, said in December that 15 of the 16 clinics continued to operate and that four of the grantees were classified by then as “financially stable,” meaning they had broken even on operating expenses and revenue over a six-month period.

Foundation leaders decided at that point to expand the program to 10 more locations, seeking out places where it could offer up-front training on the relationship between hygienists and doctors and where leaders of the medical clinic supported the plans.

This, she believes, is the future of dental care — an offering that meets the patients where they are rather than where the oral-care providers want to locate and that blends seamlessly into the bigger picture of their health care for maybe the first time.

But it won't be an easy transition in the slow-moving dental industry, she admitted.

“We continue to work on that,” Cusick said. “I think we all know how hard behavior change is.”

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