

# HOW TO ELIMINATE PPO DEPENDENCE



**WEDNESDAY  
APRIL 19, 2023**

**6:00 - 8:30PM**

REGISTRATION 5:45PM

**DINNER &  
REFRESHMENTS  
INCLUDED**

**MURRIETA SPRINGS  
CONFERENCE ROOM**

39755  
Murrieta Hot Springs Rd  
Murrieta, CA 92563

**2.5 CE's**

You have probably wrestled with the question, "Does accepting insurance help your dental practice?" There is no simple answer, but your choice will have a major impact on your practice for years to come. This is designed for the dentist who wants to stay massively profitable in the midst of shrinking Dental Insurance reimbursement.

### CORE OBJECTIVES:

- The formula for strategically dropping PPOs
- 6 step system to ensure patient retention
- How to organize your billing system to increase collections
- Key performance indicators to track a proactive transition
- Scripting communication to keep your patient base
- Provide a remarkable patient experience

### OUR SPEAKER: *Jonathan Miller*

*Executive Coach - Fortune Management*



Jonathan Miller's expertise in dental practice finance and business development is certain to enlighten the dentist awaiting to grow their knowledge and acumen for smart business strategies. Jonathan is a Fortune Management coach, who brings years of banking, lending experience and ownership development to his portfolio. His exclusive work with the Dental profession for the past decade, positions him as the foremost resourceful and sought after speaker on the subject of money and dentists.

**REGISTER BY** ➤ **Monday, April 10th** ➤ [bit.ly/3K4JTPx](https://bit.ly/3K4JTPx)

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**FOR INFO:** [remisorrentino@fortunemgmt.com](mailto:remisorrentino@fortunemgmt.com)  
**Remi Sorrentino — 760.861.9940**



**PACE**  
ACADEMY of  
GENERAL DENTISTRY  
PROGRAM APPROVAL  
FOR CONTINUING  
EDUCATION

FORTUNE MANAGEMENT INC.-CA  
(Nationally or Locally) Approved PACE  
Program Provider for FAGD/MAGD credit.  
Approval does not imply acceptance by  
any regulatory authority or AGD  
endorsement. NOVEMBER 1, 2020 to  
OCTOBER 31, 2023 Provider ID# 304402

## REGISTRATION

**REGISTER BY** ➤ **Monday, April 10th** ➤ **[bit.ly/3K4JTPx](https://bit.ly/3K4JTPx)**

Practice Name/Dr. \_\_\_\_\_

Please Print the Names of All Attendees:

Email Address:

- |           |       |
|-----------|-------|
| 1. _____  | _____ |
| 2. _____  | _____ |
| 3. _____  | _____ |
| 4. _____  | _____ |
| 5. _____  | _____ |
| 6. _____  | _____ |
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| 8. _____  | _____ |
| 9. _____  | _____ |
| 10. _____ | _____ |

**TOTAL ATTENDING** \_\_\_\_\_

\* Please Note Any Food Restrictions (Include Attendee Number) \_\_\_\_\_

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