

Ep #274: Darin Acopan - Designing Your Practice Model Post COVID-19



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David Phelps: Good day, everyone. It's Dr. David Phelps of the Freedom Founders Mastermind Community and Dentist Freedom Blueprint podcast, and with me today, Mr. Darin Acopan. He is the partner and the executive vice president of sales in the Dentist Entrepreneur Organization. Darin has been working in the DSO space for the past six years. During this time, Darin has interviewed hundreds of emerging group practice owners, which has allowed him to gain key insights in terms of what emerging owners' pain points are, along with what solutions work best to scale group practice. So Darin, welcome to the podcast today.

Darin Acopan: David, thank you so much for having me.

David Phelps: You know, I've been good friends with your partner Jake Puhl and think so much about him, and getting a chance to talk to you just a little bit here before we started the interview, I could see quickly why the two of you complement and work well together. We were just talking a little bit about collaborations and how important that is in life and learning to find the right people that you can build that synergy with. You're certainly doing that with Jake and the DEO organization, which came

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right out of Dr. Mark Cooper, who also, we've mentioned quite a bit, who's been a visionary and a thought leader in our industry for decades.

Darin Acopan: We're very fortunate to have been mentored by Dr. Cooper.

David Phelps: No doubt. No doubt. So, your background, you've done different things but I know health industry, and then you've followed a pathway where you were recruited by somebody you had worked with before, who was moving into the group practice space. That's where you found your way into dentistry. And marketing was another piece of that, the part where you and Jake came together because you were both marketers. And what you've determined, you've done in the space and where you are today with group practice owners, what aspect of the organization are you involved in primarily in assisting your clients? What's your primary responsibilities?

Darin Acopan: That's a great question. Just to give everyone on the call some context about the DEO. It's a mastermind group, so it's not a consultancy. We don't come into the practice level and provide guidance. It really is... And David, you and Jake are involved in some masterminds outside of dental... when you're the leader of your organization, you need to network with other leaders of organizations, even if it's outside of your industry. We just so happen to have created a group, if you will, of some of the most well-run groups, where they lean on each other for guidance and support during good times and in times of crisis, like COVID-19, right now.

Darin Acopan: What I do is, from a leadership perspective, help steer a lot of the curriculum, what we need to be working on, and then, the future vision of where we want to be as an organization. Approximately about 108 group practices that are in our

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mastermind group, it's about a 60/40 split between GPs and specialists. And then, on top of that, a lot of you know that we run fantastic dental conferences. It's not just for DSOs or those that want to build multi-locations. We have a lot of single-location owners that are just wanting to get a lay of the land as it relates to the business side of dentistry. Because as you already know, there's just not a lot of that taught in the traditional education track, if you will, and the majority of the CE that's really participated in by owners is mostly on the clinical side, not necessarily on the business side.

David Phelps: Yeah, so true. So true. And as we've seen in recent decades and particularly this last decade, that the business side of the health profession, health industry overall, has become just that. It's become business, and it's difficult for those who really went into their practice, into their clinical aspect, especially part of what they do, the continuing education, they're really working right there with a patient, making a difference for them. It's hard to wear both caps; the technician, the clinical expertise, and the business side. It's so hard. Very few can do that well. I believe, you can tell... Correct me if I'm wrong, but that's why group practices, I think, have evolved a lot in the last decade or so, because of that very factor. It's just very difficult to try to maintain two sides of that coin; the technical artist side and the business side.

Darin Acopan: Absolutely. I mean, when you're still burnt out from being chairside four or five days a week, and you have to do the business on top of that, that gets taxing. And so, having skill and some economies of skill, and having some business-minded individual tools that can help to support you, it really does alleviate that burden from the practice owner.

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David Phelps: Is the DEO organization private groups, or is there corporate or private equity money behind some of them, or is there a mix?

Darin Acopan: Great question. I would say our faculty, our larger DSOs, a lot of them have private equity backing, but our membership is largely comprised of owner-founders. And so, typically you're looking at someone that has either one mega location with maybe 20 plus ops, but the average member is typically about four to six locations, to give you some perspective. And again, it's a 60/40 split between GPs and specialists. Yes, they're largely independent.

Darin Acopan: We get asked quite often, when I go to conferences, and private equity, representatives will come up and ask Jake and I, "Do you want to roll it up and have a DSO out of the DEO?" And I tell them, "I can't get 10 alpha male or female owners to even agree on the same bonding agent. I don't think I want to do that." And so, you'll get it as a dentist. That's funny, and it's true. But for a private equity individual that maybe doesn't have a lot of dental experience, they just don't get it. So, I said, "No. A lot... They want to be autonomous. That's why they're so good what they do."

David Phelps: Yeah. So, in that regard, because we do like the individuality, we like the autonomy, then, how do you find the best private group practices do come together? I know there's a lot here, but if you give me just the pros and cons or in a nutshell, what you find that makes those that work well together versus those that fall apart. Does it start with the character and assessing strengths and core values so that you start there or what? What do you find?

David Phelps: Great question. It is absolutely the core values and why you're doing this because for anyone that has scaled a

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business, whether it's one location or many, you're going to hit some dark tunnels for sure, as you scale up and optimize. Our philosophy, and a lot of this comes from working and being mentored by Dr. Cooper, is you've got to work on yourself first. That really is something... As chief executive officers of our own enterprises, that's something that doesn't come natural. You can get your MBA and you still don't know everything there is to run business until you're actually running your business, right?

David Phelps: You work on yourself and then the next thing you have to do is work on your core team. There are always those within every organization, whether you have an associate or not if you're a dentist, but there are always those in your organization that help you really move the needle. You have to execute your vision through those people because you're chairside, you can't be at all places at the same time, and it gets exponentially more difficult when you go into multi-locations. So, work on yourself, work on your team, and then you work on the organization.

David Phelps: I think the challenge is people want the secret sauce blueprint to go straight to the organization level without working on getting the right team in place and without working on themselves, and they wonder, "Why am I stuck where I'm at?" Dr. Cooper had a great saying, which is, "You're really perfectly designed to get the business results that you're currently getting."

David Phelps: Very well said. Let's go into this time period. You already mentioned we're in the COVID-19 pandemic, this mandated shut down of the economic engine of the US. For a lot of our dental practice practitioners, that means that they're pretty much closed, but maybe seeing emergency patients. It depends upon their jurisdiction, of course. I've called this time, Darin, the great reset because I think a lot of things are going to

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be reset; socially, our culture, business operations across the board.

David Phelps: Many industries, small business owners, will not come back. I think there's going to be some fall out in dentistry. There's going to be just an overall reset of what comes out of this. I'd just like to get your opinion on that. What do you think will stay the same and what do you think will be different?

Darin Acopan: Great question. In a nutshell, I agree with you, David. What I know for sure today and what you know for sure today is that it is April 9th, 2020. The only other thing I know is that three years from now it's going to be April 9th, 2023, and somewhere between that time frame, there's going to be this survival line in the middle. I don't know when, but there will be, and that, quite frankly, is the tipping point when people's action overcomes their fear. We see this happening in every crisis. You go back to the last two that we've had with the '08 housing market decline and 9/11, and you'll see the very similar trends if you will.

Darin Acopan: So, you'll have three types of owners that, at least, I'm getting bombarded with. The first group is a minority group, but they're fear-based right now. They are panicking, they do not know what to do. Their teams sense it. They are making gut reactions without getting data to support that, and they are largely making decisions in a vacuum on their own island. That's not a good place to be. So, I would say that owner is really on the trajectory that you mentioned, where they might not even make it to that survival line, let alone three years from today.

Darin Acopan: The majority of folks are going to have this up and down curve, and they are unfocused owners. They're not fear focused, but they're unfocused. They're kind of... The fight or flight response is kicking in full time, Dave. They've kind of got

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that prepper mentality, where they're getting the N95 masks, they're researching UV lighting before the PPE recommendations really come down the pipe. The reality is when you look at those types of owners that are unfocused and everything looks like a fire that needs to be put out today, and you're not prioritizing what needs to come first and what fires can, quite frankly, you let burn as a business owner, when you look three years from today, they're largely going to be exactly where they were at before COVID-19. But most likely, they're going to be a little bit worse off because the cost of doing business is going to get higher, regardless of whether we get new business or new patients or not.

Darin Acopan: Then the third group of individuals, and this is probably the majority of the DEO membership resides in this group. They're largely impacted as well. No one is coming out of this unscathed. But what will happen is the difference between this strategic-focused group and the unfocused group is, at that survival line in the middle of the next three years, they're going to exponentially outpace everyone else because they are making moves right now, as we speak, to educate themselves on what does... What changes do I have to implement right away, what does my team need to look like going forward, and how am I going to take advantage of this opportunity?

Darin Acopan: Because it is a universal reset. For any one of you out there that owns a practice, I don't think you'll be coming back at 100% in capacity. I was just talking to a practice owner, David, that didn't even think of the fact that, hey, my schedule is booked, but how many of your patients may lose their dental benefits?

David Phelps: Exactly.

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Darin Acopan: It's those types of things that you have to think through. If you didn't get the memo on being patient-centric pre-COVID-19, listen to me now, you're going to have to do things differently. Saturday, Sunday hours might be the new norm. You're going to have to get into the patient's mindset, and those that are the most empathetic and the most convenient are going to win. So, I'm sorry if you have to go from three or four days a week and you were kind of at the tail end of your career and taking it easy, you might need to ramp up again like you've never had to before in your career. That's just the reality of what we're all going to have to do to bootstrap through this long, dark tunnel. That the way I truly feel.

Darin Acopan: We have members in the DEO that are forecasting worst-case scenario: "What if my production is only 50%?" And then, they're taking a staggered approach. "Well, what about 70%? what about 80%?" And so on and so forth. They're being very pragmatic and strategic about what they have to do in any given scenario so that they're not caught off guard. When the restrictions lift again, they want to be first out of the blocks.

David Phelps: So, for those that are in that third category, that are looking very pragmatically as to what worst case may be and anticipating there will be an open date at some point, what are some of the tactical measures that they are focusing on right now? You mentioned team. I'm sure, really over-communicating with team and patients, right now. Some things that I think are... Well, I'm not just going to say they're universal because, again, you've got three categories of business owners, and I think you're absolutely right. But those that are being more proactive, they're doing certain things right now: looking at their cash flow management, anticipating not coming back, as you said, maybe at 50% of revenues.

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David Phelps: So, coming back, being more consumer-oriented. What things specifically? Does it mean not bringing back all your staff at once, probably? Maybe having a strategy about how that happens and watching your cash flows? Is there a way that dentists could be somewhat proactive about scheduling certain types of patients and procedures? Again, not knowing what that looks like, but setting things up so that when the green light does come on, you've got some momentum going back in?

Darin Acopan: I think it's absolutely a phased approach. I think you really have to look at your core team members, and really, if you have associates or if you have multi-locations, your core associates, and hopefully you have some partners there with you, and how are you going to stagger that? I don't think you can hire everyone back. I'm sure a lot of your audience has had to furlough or lay their teams off. There is a strategy as far as to how you slowly ramp up again, and so you have to forecast somehow.

Darin Acopan: I hope you have a really good accountant or a controller that can help you through this. You're going to need one. If you don't have one now, now's the time to go look for one because it's too much. None of us went to business school, right, for the most part, on the call? And none of us is an accountant or an actuary, so you're going to want to have someone that can run the numbers and paint it out for you in black and white. Not to mention, help you out with the PPP loans, and the EIDL loans, and everything else, and make sense and heads or tails of that. You're going to need someone in your corner.

David Phelps: Darin, most small business owners, to that point, have accountants or CPAs, and not that they're not relatively good at what they do, which is unfortunately just like historical numbers and filling out tax returns. You mentioned a controller, more of a

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financial officer. Small businesses, and I'm thinking like the solo dentist, not so probably affordable. Although, there are fractional services out there, right, where you can get that kind of help, where you have that forward-looking cash flow management to help you make these decisions.

David Phelps: Because it is, it's too much for a small business owner, particularly one who's more technically inclined or maybe the visionary, because... I appreciate numbers, I appreciate detail, but I am not the one to provide those. I know that, for me. So again, group practices have more capability to fulfill those seats. Can a smaller business do the same thing, do you believe, on some level?

Darin Acopan: There are a lot of great vendor relations out there. I would just say that if you're using your local attorney or your local CPA, nothing against them, but if they don't understand the dental space and if their clients aren't primarily dentists, it would probably serve you well to start interviewing some other options out there because this is the niche that we're in. And yes, we have a lot of... A lot of our groups and members, David, they don't have controllers or CFOs, if you will. They're still using vendor relationships as well, and they're having a lot of success doing it.

David Phelps: Yep. Yep. Good. Good to know. Good to know. On the patient mindset side, we know that patients, consumers, of every service out there today are very cognizant now of the social distancing issues, and I'm sure just about almost every dental patient has seen some reports about, "Careful of the dentist. There's these things called aerosols in the air." So, let's put our mind in that consumer. You're not a dentist, so you probably have a little bit more appreciation for that because when you're in that environment, we're used to aerosols, we're

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used to all that stuff, and yes, we used personal protective equipment in the past.

David Phelps: What are patients, consumers, going to be looking for, outside of just whatever new compliance or regulations there may be? I'm talking more about the aesthetics of how that practice operates going forward.

Darin Acopan: Great question, Dave. What I would say is safety's first, right? If you can win mom over, she's going to essentially dictate what dental procedures are conducted on the family at the end of the day. Whether it's paed for the children or even for her husband. Traditionally, that's just the way it is. And so, what are you going to do to appeal? Things as simple as, "Hey, all of our team is safe. We do things like take temperatures. We have hand sanitizers. we have protocols in place to make sure that you are absolutely safe. There's N95 masks." Whatever that is to give the parents safety.

Darin Acopan: I mean, at the end of the day, you can only do so much, but going that extra distance and taking those measures and broadcasting those measures on free platforms like LinkedIn and Facebook. It depends on who your audience is, but using other platforms as well, right, outside of Facebook and LinkedIn. There are a ton of them out there. Your team is your advocate, right? And so, that's the other important thing is when you start having your core team around you and you start paying attention to your core internal team, then they can be your advocates as well, in the community. Because chances are, it's usually not the dentist-owner that is in charge of the social media presence. So, that's the thing to do.

Darin Acopan: The other thing is, look at do you have an in-house dental plan if someone loses their dental benefits? Are you making it easy to do business with yourself? Are you looking at

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teledentistry options? I know that's a highly charged topic right now, but you could do teledentistry and teleortho. There are platforms that are legitimized. I know there are certain states that have regulations. However, you're going to have to look at doing business differently. It doesn't hurt to at least vet the options, and to see if it's a fit for what you want to do at the end of the day. You're ultimately in charge, but you should at least vet all the different opportunities that are available.

David Phelps: Yeah, good points. Good points. Let's talk a little bit in terms of scheduling and the actual choreography of providing treatment. In the past, depending upon someone's model, but dentists oftentimes are with a patient. They may have a couple of chairs going. They've got expanded duty assistance. They've got several hygiene chairs. They have some choreography going on, where they can move, and there's some signaling going on. They take a break. Going forward, are you having discussions with any of your dentists in terms of how that choreography may change? Again, we don't know exactly, but I'm just, again, thinking about the basic PPE may change. Any thoughts there?

Darin Acopan: PPE regulations will change. I think there'll be more obviously than less. But there's... Everyone knows of the company Airbnb, correct?

David Phelps: Mm-hmm (affirmative).

Darin Acopan: Airbnb's founders go through an exercise called the 11-star experience. Are you familiar with it?

David Phelps: A little bit, yes. Mm-hmm (affirmative).

Darin Acopan: Yes. So, in that 11-star experience, they ask themselves what would an 11-star experience be for our consumer base.

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And the reason they go through that is because once you figure out what an 11-star experience looks like, a five out of five is pretty easy to obtain. What I would recommend, and I was just on a call with some of our members last evening, David, one of the things I can guarantee that the majority of your listeners and audience has not done is actually videotaped and documented what that perfect patient experience should be.

Darin Acopan: You can always add the PPP elements into that choreography, but if you don't have it documented on a simple Google doc that can be shared across the spectrum of location or locations, I think you're missing a huge opportunity and you're just leaving it to chance. I'm talking about everything choreographed, from the call to the chat, to how does the patient flow from the waiting area to the front desk, to the back office, and then back forward to the front, and the recare model built-in.

Darin Acopan: You're going to have to be like the Ritz Carlton. You have a choice. You can be like the Ritz Carlton, or you can be like the Motel 6, or somewhere in between. I would highly advise, whatever you decide to be, you decide and you actually model it out. You get the whole team, clinical and nonclinical team, trained on what you expect. Because if you don't set the expectations, then anything's going to go, and I think it's not going to serve you very well. You're sitting at home in rest, right now, and now's a perfect time to map it out.

David Phelps: Yeah, that's excellent. Because patients' perceptions, what they see, is going to play into whether or not they decide to come to your practice, stay with your practice. Even if you had great relationships before it's... You said, the moms. The moms are the ones that are making these decisions, and if they're thinking about their family and their kids and still, if the

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virus is still out there and there's no vaccine, they're going to be watching. They're going to be really, really cognizant of everything that's going on, and if there's one misstep to the patient, to the mom, a glaring misstep, that could be enough that she says, "I'm out."

Darin Acopan: Absolutely. We live in a world where we're under a microscope constantly, and you're competing with the Google reviews and the Yelp reviews. You have to figure out how are you going to outshine the competition because it is going to be a land grab for patients. For sure. But it first starts with the talent, so make sure you have a talented team that can help you execute this because you could have the best patients in the world and if you don't have the right team to support you, it's going to be all for naught.

David Phelps: I think some savvy business owners are using this downtime, as they are hopefully communicating with their staff over virtual Zoom, keeping up to date with them, checking in with them, but maybe an opportunity to test and see who's on board and who's not. There's some opportunity here to do that, and I'll just kind of leave it there. But you're right, coming back with the staff that you want to be the staff, the culture, the team you want to carry you forward, it's going to be so much more critical. We talked about it in the past, but now I think some of the tough decisions that many business owners weren't willing to make because they just weren't uncomfortable enough, now's the time to start making those.

Darin Acopan: Absolutely. I mean, this is a blank canvas. It always has been, but now it really is. What do you really want for yourself? This is the half-time show. You get to reset and go back to your practice, and what do you want it to look like? Do you want it to

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look the same? I know a lot of owners that don't, and so what are you doing right now to change that?

David Phelps: Yeah, well said. All right, so let's go to really my... This is a question I'm always toying with because, while I understand the benefits of the collaboration about it, and if you can do that right, you can really develop a model, a business model, that can take the best of different people and leverage the facilities, leverage the overhead, leverage everything. Which is, again, part of the business aspects of what healthcare has gone to, especially dentistry.

David Phelps: The solo dentist practitioner, and again, there's a lot of great solo practitioners, and it all has to do with their positioning, what market they're in, how they set themselves apart. There will always be a place for the solo dentist. I just feel, Darin, that it's going to be fewer numbers that will be able to survive past that survival line. Those that do, they've got a special place. They've got special clientele. They're doing some things really, really well with what they do. But I think that's going to be more the outlier coming out of this. Your thoughts.

Darin Acopan: My thoughts is it's always been a perfect storm pre-COVID-19. None of us was ever thinking that a dental student would graduate with half a million dollars in debt from some of these dental schools, not even going into residency. And the requirements to graduate, I don't think they've been increased. If anything, you've had more students come into the pipeline than the demand for it. Not to mention, the differences between the percentage of male to female graduates 10 years ago versus what it is today, which is more of a 50/50 split. And I do see a lot of the associates, both male and female, not wanting the burdens of ownership. They want to associate, whether it's with a large group practice or whether it's with a solo, they're

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not looking necessarily for the headaches that come with ownership.

Darin Acopan: So, I think that puts a lot of pressure on your audience that is looking to exit in the next 10 to 15 years or less because now what are your options? You're already at the point where none of you was really designed to be in the mouth for 30, 40, 50 years, and it's taken a toll on your body physically. And so, you're going to have to bring on an associate or a partner. There's got to be some exit strategy that you're thinking about. So, I think there'll always be a place for solos. I just think that they're going to have to change their exit strategy a little bit.

Darin Acopan: Not to mention, I think a lot of the larger groups that were aggressively acquiring practice locations are probably going to be impacted quite a bit by COVID-19, in terms of they have to go through their own restructuring on their enterprises, so the last thing they're going to do is start buying aggressively right now. Right? And so, there's that's to compete with. So, I really do actually feel for those practice owners that were looking to exit in the next two to three years. Because the last thing they'd ever thought in their minds is that they're going to have to actually work harder during this time period when they've worked hard their entire lives. That's the reality that they're in right now.

David Phelps: Yeah, it's a tough reality. You just mentioned that a lot of the larger groups, DSOs, are going to have to go through their own restructuring. I agree. I agree. That's going to put a lot of things on pause. The multiples that were being paid pre-COVID by private equity. Obviously, those valuations are going to go down. Do you think that's going to stay down for a good while? Do you think private equity will find another industry to go to

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because they're all about the numbers? Any thoughts there? I've thrown a lot at you there but any thoughts?

Darin Acopan: No, that's a great question, I think the multiples from both private equity and large strategic DSOs are going to come down. They have to, inevitably. It is no different than what were home prices like in 2010 versus today, or pre-COVID? Right? It ebbs and flows, and it is what it is. So, at the end of the day you have to ask yourself, "Well, timing accounts for probably 95% of every equation. How much runway do I have and what do I really want for myself?"

Darin Acopan: You can always associate and make a really good living without having the burdens of the ownership, you know? You could sell or finance as well. If you have an associate, that's really good, and you want to handcuff them to the business, and they're strapped because they have student loans and they can't get approval for additional ones, seller financing is a great option. There are always options, which is why I don't care if it's the DEO or another group, I only am able to spit out this knowledge to you because I've robbed and duplicated from the entire mastermind group, and so, you need access.

Darin Acopan: And Dave, I know you're part of many mastermind groups and you're better for it, right? You don't just have those books behind you because they're fun decorations. You're actually trying to be a lifelong student. You have to do the same thing as a business owner. This is too much time and effort put into your baby as a practice owner to let your destiny be in anyone else's hands but your own. We're all dealt this hand with COVID-19, but you can still play the best hand with what you're dealt. But that's going to require you to lean into other organizations and know that you, individually, don't have all the answers because you haven't made all the mistakes.

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Darin Acopan: That's really the only difference. I just have access, and you have access, to groups that made many, many mistakes to the tunes of seven and 10 figures sometimes, and I've been able to benefit tremendously from having access to that knowledge. So, that's what I would recommend is, work on yourself and work on your team, but work on yourself by working with others that have been there and done that or at the very least are at your level and have a reciprocal relationship. There is no real secret sauce. There's no IP nowadays. All the answers are out there, but it's just about who has the efficacy, who... If you can learn from those that teach versus those that do and have a track record, always Google for those that do and have a track record, hands-down.

David Phelps: That is Sage advice, my friend. Darin, thank you so for your time today. You really gave some great insights and you're... As you said, you've borrowed from the experiences of so many and that's the way to go forward in life. Don't do things in a vacuum. Don't try to be the soloist because this is not a time to be that person, as much as you might want to be that.

Darin Acopan: Absolutely. And I have just one more thing for your audience, a bonus. We normally have, in fact, a very well attended conference in Phoenix called the DEO Summer Summit. We're actually pivoting the health of every one of our vendors and every one of our attendees to a virtual event. So, we're actively advertising for that now. That's going to take place June 4th and 5th. It's going to be virtual. We're going, again... We have the details on our site, deodentalgroup.com. But for your audience, we've created a promo-code where it's going to give you an additional \$100 off the virtual ticket price.

Darin Acopan: If you enter the promo code, freedom... We felt that was appropriate for your audience. Just enter the promo code,

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freedom, it'll knock \$100 off the current rate. We hope that during this time, hopefully, we're not still down in June, but if you are, this'll probably be a very good use of your time and there's going to be CE involved as well. So, you'll get CE. There'll be great content. And really, learn from others that have been there and done that would be my advice. Don't try to reinvent the wheel.

David Phelps: Yeah. I've been to the DEO dental group conferences before and they're outstanding. So, you're absolutely right. This is a chance to really utilize the brain trust of a group that is very progressive, and you all give and share a lot. There's none of this ego at the door. It's like, "Let's bring it. Let's talk about what's worked. Let's talk about what hasn't worked." That's where you really get some real traction, figuring out what your model is going forward, and that's what we all need right now with this reset.

David Phelps: As you said earlier, what do you want your model to look like? Now's the time to get clarity on that. You can find the people that will... that you can bounce ideas off of and get perspective so you can decide what you want to design for yourself, going back to work after the COVID-19.

Darin Acopan: Absolutely, David. Thank you so much for having me on today. Really, really appreciate it.

David Phelps: It's been a great conversation, Darin. Thank you so much. So, deodentalgroup.com. Code word, freedom. We'll put that in the link in the show notes so people can also get that as well. Thank you, Darin.

Darin Acopan: Absolutely. Stay safe. Thanks, everybody.

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