



Practice Management

Core system for scheduling, charting, perio, billing/claims, and patient records — cloud or server.

VENDOR	DEMO DATE	WHO YOU SPOKE WITH
<input type="text"/>	<input type="text"/>	<input type="text"/>

WHAT TO ASK ON A DEMO

TICK WHAT THEY SAY · NOTE · N/A

- 01 Is it cloud-native, server/on-premise, or hybrid — and what does each cost?** Doesn't apply

Deployment model drives IT spend, remote access capability, and update costs.

Cloud-native
 Server/on-premise
 Hybrid

NOTES

- 02 What transfers during data migration from my current PMS — and what does not?** Doesn't apply

Partial migration means staff manually rebuilding records at go-live.

Full history
 Active patients only
 Demographics & financials only

NOTES

- 03 What is the total cost at go-live and at 3 years, including every module I need?** Doesn't apply

Base quotes routinely exclude claims fees, imaging bridges, and per-provider costs.

All-inclusive flat rate
 Base + add-ons
 À la carte

NOTES

- 04 How long does go-live take and what support is dedicated to my team in 90 days?** Doesn't apply

Implementation timeline directly determines production loss during the switch.

Dedicated on-site manager
 Remote assigned coach
 Self-serve modules

NOTES

- 05 What does day-to-day support look like, and what is your uptime SLA?** Doesn't apply

Cloud uptime below 99.9% means potential hours unable to schedule or submit claims.

24/7 live support
 Business hours + ticket
 Ticket/email only

NOTES

06 **What are the contract terms — length, auto-renewal, cancellation, and data-export fee?**

Doesn't apply

Missed auto-renewal windows and exit fees can lock a practice in for an extra term.

- Month-to-month
- Annual, 30-day cancel
- Multi-year lock-in

NOTES

07 **Who owns my data, how is it backed up, and how does this meet HIPAA requirements?**

Doesn't apply

Some vendors charge for full data exports and retain rights to de-identified data.

- Practice owns; free export
- Vendor hosts; practice owns
- Unclear

NOTES

08 **How deep is the clinical module — perio charting, imaging bridge, and e-prescribe?**

Doesn't apply

Clinical depth varies hugely; imaging bridge reliability affects workflow every day.

- Full built-in suite
- Native perio + bridge
- Basic; extras cost more

NOTES

09 **Are e-claims and ERA/EOB posting native, or do I pay a separate clearinghouse fee?**

Doesn't apply

Per-claim clearinghouse fees compound to thousands per year and add a failure point.

- Native, included
- Clearinghouse fee disclosed
- Separate contract required

NOTES

10 **Can I speak with two practices that switched from my current PMS in the last 18 months?**

Doesn't apply

Same-path references are the most reliable signal for how migration actually goes.

- Yes, same-PMS references
- References, not same path
- No references

NOTES

YOU'VE EXPLORED 1 OF 24 CATEGORIES

Imagine the rest of your practice running this clearly.

You sized up one category today. The other 23 — staffing, no-shows, insurance, slow collections — are already sorted, each vendor **classified by the problem it solves.**

EVERY PROBLEM IN YOUR PRACTICE, ALREADY SORTED

Clinical AI	Imaging	Practice Mgmt	Patient Comms	Insurance	Revenue Cycle
Payments	Membership	Credentialing	Scheduling	Marketing	Analytics
AI Scribe	Teledentistry	Phone / VoIP	Virtual Assts	Staffing	HR & Training
Treatment Plan	Engagement	Supplies	Lab	Hardware	Compliance

500+ vendors · sorted by the problem, vetted by our editors



Not sure what to fix next? Tell Mola what's slowing you down — it points you to the right shortlist.
dentaltechhub.com/mola

Get the next call right the first time.

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