

TRAIN PATIENTS TO BE BETTER PATIENTS

Lisa Michalek, FAADOM
lisa@milliondollarppo.com

Implementing a new system or policy with your TEAM is not always as easy as we would hope it to be. Keep in mind the reason behind the need for a new system or policy, the benefit to your patients, the TEAM, the doctor and the practice as a whole.

Always start off with the wins and the positives. The losses and the negatives seem very trivial and not worth discussing when you put the wins and positives first.

The process to implement any system or policy has to start with the WHY. A complete explanation of WHY we are going to try something different. Then we move on to the HOW and end with the BENEFITS.

- WHY:
 - ✓ Too many cancelations
 - ✓ Too many No Shows/No Call
 - ✓ Front desk scrambling to fill the open appointment if possible
 - ✓ Loss of revenue
 - ✓ TEAM down time
- HOW:
 - ✓ Change in handling those types of calls
 - ✓ TEAM's help prior to this being a problem
 - ✓ New verbiage to help save that appointment
 - ✓ Putting value on that appointment
- BENEFITS TO THE TEAM AND PATIENTS:
 - ✓ Less time spent on the phone trying to fill open appointments
 - ✓ Keeping revenue on the schedule
 - ✓ Better patients makes a happier TEAM
 - ✓ Happier TEAM makes for a happier doctor
 - ✓ Patients respect your time and understand the value of appointments

Most doctors don't like to talk about overhead costs that are associated with owning a dental practice. Seven out of ten TEAM members never know anything about the business side of a practice. They don't need to know specifics but I always recommend that you at least go thru the basics so that a TEAM buys into the WHY and can see the value of implementing the new system or policy.

- BASIC OVERHEAD
 - ✓ Dental practices are the most expensive field in medicine
 - ✓ Most expensive thing in a dental practice is the TEAM
 - ✓ Open time means empty chair
 - ✓ Loss of patients on the schedule is a decrease in revenue
 - ✓ Same bills have to be paid on a monthly basis

The NEW PATIENT CALL is the most important call to get right the first time. That first impression is what the patient always remembers and you rarely ever get another chance to get it right. If a new patient call takes the TEAM 20 minutes then so be it. When that phone is hung up you want that patient to feel like they have been well taken care of, all their questions answered, and a resolution to why they called in the first place. You are looking for your first Five Star Review from that NEW PATIENT. They are also the patients that have no pre-existing ideas of how your office operates. Basically they are a clean slate that you mold from that initial new patient phone call to that perfect patient that you love and wish all your patients were like them.

- HOW TO MAKE THAT FIRST CALL BE THE MOST IMPORTANT
 - ✓ Called the right office
 - ✓ We are going to take good care of you, you called the right place
 - ✓ We have an awesome TEAM and a wonderful doctor
 - ✓ Emergency patients always have empathy
 - ✓ Emergency patients seen the same day
 - ✓ Emergency patient does NOT schedule take a phone number and ask to call them back later that day
 - ✓ New Patients seen within the week

Putting value on HYGIENE APPOINTMENTS is more difficult. Patients see this as, IT'S JUST A CLEANING, THEY WON'T MISS ME, and my favorite one, I WILL BE ABLE TO GET ANOTHER APPOINTMENT PRETTY QUICKLY. Because these appointments are made three, four and six months out, patients have a tendency to not write them down or just plain forget about them.

- HOW TO PUT VALUE ON THESE APPOINTMENTS
 - ✓ Hygienist calls their own patients to give a friendly reminder one month out
 - ✓ Hygienist calls all new patients on the schedule to welcome them to the practice and introduce themselves
 - ✓ Doctor calls on new patients regardless if seeing him or hygiene first
 - ✓ Find something medical to attach to their appointment
 - ✓ Stress that you have reserved this time specifically for them
 - ✓ Stress after every appointment the importance of seeing them next time

Putting value on the DOCTOR'S APPOINTMENTS can be somewhat easier but we still have those patients that just do not value a doctor's time. Most patients do not realize that a dentist doesn't see a patient every ten to fifteen minutes like a general medical doctor does.

- HOW TO PUT VALUE ON THESE APPOINTMENTS
 - ✓ Some offices collect the insurance co-payment up front to schedule the patient's next appointment
 - ✓ Another way is to collect a reservation fee to reserve the chair time with the doctor

- ✓ Stress the importance of fixing their dental problem and the impact if left untreated. "THE MOST EXPENSIVE DENTISTRY IS UNTREATED DENTISTRY"

NEW PATIENT CALL:

FD: Thank you for calling Dr. Jones' office, this is Susie, how may I help you?

Patient: This is Jackie and I have a horrible toothache.

FD: I'm so sorry to hear that Ms. Jackie. I know how painful a toothache can be. I'm going to help you. Let me see what we can do for you today. I'm sorry Ms. Jackie but I don't remember the last time we saw you. Can you refresh my memory please?

Patient: Oh honey I'm a new patient. I have never been there to see you.

FD: No problem at all. You have called the right office. We have an awesome TEAM and Dr. Jones is a wonderful dentist and I am sure you will love him as much as all of our other patients do. I know you are not feeling well but if it's okay with you I would like to get some information from you so I can let our TEAM know ahead of time what actually is bothering you.

If this call was from an existing patient, asking them to refresh your memory on the last time they were seen, really makes an impact on that patient. It makes them feel important and that you do care about them. If you jump right in and ask if they have been seen before, or better yet, are you an existing patient of record, you may have just offended a long time patient that expects you to remember them. There is NO way you could ever remember every patient but this verbiage helps buffer the call.

HYGIENE CANCELLATION CALL:

FD: Thank you for calling Dr. Jones' office, this is Susie, how may I help you?

Patient: Hi Susie this is Jackie Humphrey. I have a 2:00 appointment today that I need to cancel.

FD: Mrs. Humphrey I'm sorry to hear that. Your hygienist Valerie was looking forward to seeing you today. During our morning huddle this morning with Dr. Jones she talked with him about your diabetes and the change in your medication that you made us aware of at your last visit. He was going to talk more with you on the impact this has with your dental health and he wanted to make sure everything is still looking healthy and that your not having any problems.

FD: (At this point just be quiet and wait for a response from the patient. Let what you just said sink in.)

Hopefully the patient makes other arrangements and keeps the appointment.

Towards the end of the year and when insurance companies roll over patient's benefits you can use a different approach.

FD: Mrs. Humphrey I'm sorry to hear that you need to change your hygiene appointment for today. Jackie was looking forward to seeing you. If we move your appointment I am just not sure where I can schedule you. She is so busy and her schedule is really tight until after the New Year.

I would really hate to see you not take advantage of your dental insurance and using your two dental cleanings a year. If we move you to next year you will forfeit one of your cleanings from this year. I would hate to see you lose that benefit money.

DOCTOR CANCELLATION CALL:

FD: Thank you for calling Dr. Jones' office, this is Susie, how may I help you?

Patient: Hi Susie this is Nancy Smith and I have an appointment today with Dr. Jones at 3:00pm that I am not able to keep.

FD: Oh no Ms. Nancy I hope everything is okay?

Patient: Everything is fine I just can't make it.

FD: I'm glad to hear everything is okay. I was a little worried there for a minute. Dr. Jones was looking forward to seeing you today. We allowed an hour and a half to work on that cavity and to get your crown done for you today. His schedule is really full for the next month or so and I'm not sure when I can get you back in. (At this point just be quiet and wait for a response from the patient. Let what you just said sink in.)

Patient: Well I'm sorry I just can't make it.

FD: I understand you have a conflict in your schedule for today and I want to help you. With the holiday weekend coming up I would hate for something to happen to one of these teeth we are scheduled today to work on for you. I wouldn't want you to have a toothache and Dr. Jones may not be available to help you.

Towards the end of the year and when insurance companies roll over patient's benefits you can use a different approach.

FD: Mrs. Smith I'm so sorry to hear that you need to change your dental appointment for today. Dr. Jones was looking forward to seeing you and making sure we took care of those needed fillings so your cavities don't get any worse. If we move your appointment I am just not sure where I can schedule you. His schedule is really tight up to the end of the year. Patients want to use their dental benefits that they have left so they don't lose them. I would really hate for you to also not be able to take advantage of what benefits you have left to use to get these fillings taken care of.

Patient: What do you mean I lose dental insurance benefits?

FD: Well Mrs. Jones, if you don't use the benefits that you have remaining for 2017 you do not get to carry them over to next year. You forfeit those funds to your insurance carrier.

Hopefully the patient makes other arrangements and keeps the appointment. I never recommend that a front desk coordinator jump right into the conversation with a missed appointment fee. This always escalates the patient's conversation and never ends well. Not all appointments can be saved and not all patients are willing to work with you and understand. There is also the sick child or sick family member, family emergencies, and the work excuses. Some battles are NOT worth fighting because we just need to understand that life sometimes impacts a patient's ability to keep their appointment. When this behavior becomes a constant problem with the same patients you may need to decide if this patient is worth keeping. Can

they be molded or trained to be a better patient? Some are just not worth the effort to try and save. Move on and let them go. I am almost positive that your TEAM already has a list of “problem patients” that they would love to see dismissed.

Other handouts available:

Bonus verbiage scripts for patient cancelations

Bonus verbiage scripts for new patient doctor call