

# TROJAN TODAY

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A NEWSLETTER FOR CLIENTS OF TROJAN PROFESSIONAL SERVICES, INC.



## What is your Patient's Perception? PART 2

By Kay Huff

*A patient's perception is reality for that patient. As we said last month, it is essential that every step of the patient visit — from the initial phone call, how the patient is greeted and seated, treatment presentation, payment request, scheduling of next appointment, checkout process, and all outgoing care calls — is representative of your practice's high quality of patient care. This month, we cover what happens when the patient arrives at your office.*

### Meeting, Greeting, and Seating Patients

Each and every person entering your office must be welcomed. Greet patients in a professional manner (stand up, call patient by name, shake hands) and provide any necessary information about the status of the patient's appointment, such as wait time.

Use closed-ended statements when speaking to the patient to prevent spontaneous conversations that can become long and involved. *"Mrs. Wilson, it is nice to see you today. Dr. Happy will be with you in a few minutes."* A very powerful tool is to greet your patients by name. This is another reason why you should utilize your technology and have a photo of the patient on the computer. Most dental software systems now have this feature. Also, since perception has to do with the senses, I love entering a practice that has essential oils and aromatherapy in place. Without even realizing it, there is an instant calming sensation and a feeling the practice is warm and welcoming.

*"While you're waiting, is there anything I can do for you?"*

*"Would you like something to drink or a snack?"*

*"Please help yourself to one of our magazines and relax until the doctor is ready for you."*

If you happen to have a television in your reception area, make sure it's tuned to something positive! If you fill your patients with negativity prior to the appointment, do not

be surprised if it affects their visits and your case acceptance. Patients should not have to wait longer than ten minutes after their scheduled appointment time. If it will be longer than ten minutes, the patient must be told approximately how long the wait will be. If you expect patients to be at their scheduled appointments, then it only makes sense to see them on time!

When the clinical team member comes to the reception area to get the patient, she must walk out to the reception room, look at the patient, and call him by name. Then, make an introduction. *"Hello, Mike. My name is Stephanie. It's nice to meet you. I will be your dental assistant for your appointment today. Dr. Happy is ready for you now."* Walk with the patient to the treatment area. Once again, it is important to stay away from open-ended questions.

You may offer to give the patient a brief tour including the restroom, consultation room, and, of course, the sterilization area. If you have a consult room, I recommend using it for your new patients! Have the New Patient Coordinator seat the new patient in the consult room, and review the details of the appointment. Once this is complete, introduce the patient to the assistant or hygienist to begin the short tour. You can reinforce again that the patient has made the right decision by saying, *"You're going to love Dr. Happy! He is so gentle. Dr. Happy has all the state-of-the-art technology, and you'll be amazed that dentistry can be this comfortable. We also have digital x-rays that minimize radiation."*

*continued on page 2* ▶

## Patient Checkout

Because preventing misunderstandings is much easier than correcting them, take time to be upfront and honest with your patients. Always “inform before you perform” any procedure.

There are three specific pieces of information that need to be clearly communicated to each patient about his or her dental appointment — Procedure, Investment, and Time (PIT). This policy and system is fundamental in building a relationship of mutual respect with your patients.

The clinical team and front office team members are held accountable for verifying the PIT stop has occurred before the patient has left the office. For example, the clinical team walks the patient to the front desk, verifies Procedure and Time with the patient for the next visit, and tells the patient the front office team member will go over their personal Investment for the next visit.

## Care Calls

Many practices go the extra mile by placing care calls. This allows the practice to maintain relationships with patients even after they have left the office. Ask about their visits. What did they feel went well? Where could you improve? Share with them your excitement about being able to meet their needs. Some offices choose to do this with personal phone calls, others choose post-visit surveys, and some choose personal note cards. If you are unable to reach a patient by phone, consider sending a personal note card saying the doctor/hygienist had hoped to speak with them. Be sure to document all outgoing calls either in the chart or in the computer. Utilize surveys. You can actually review them during your team meetings and get a true picture of your patients’ perceptions, which may be different than yours. Either way, building and maintaining relationships is what keeps patients returning for years to come.

## Perception is Reality!

Here is a great exercise. It will include the team in the delivery of a WOW experience and share your team’s perceptions!

Have your team break into groups and list these topics:

1. Quality of Service
2. Areas of Expertise
3. Reasons they would refer a friend to your office

When you regroup, share answers with each other. Have someone type them up so when you are talking about your office to a patient in the future, you can use quotes directly from the team. This is very empowering!



**Kay Huff** brings more than 36 years of dental experience to ACT Team, with extensive knowledge of business systems, leadership, and team motivation. She is also a Certified Consultant with Bent Ericksen & Associates, as well as a member of the The Academy of Dental Management Consultants (ADMC) and The Speaking Consulting Network (SCN)

American Assoc. of Dental Office Managers AADOM.

**FMI:** 1-800-851-8186 or [www.actdental.com](http://www.actdental.com).

## Ask the Consultant

**Q:** What are the criteria for disposing of charts for patients who haven’t been here in a while, say five years or longer?

**A:** Here are the Chart Retention and Disposal Guidelines:

- 10 years from the last date of treatment. (This may vary from state to state; check with your state).
- Minors: 10 years or until age 25, whichever is longer.

Records should be shredded or disposed of in a manner that makes personal information unreadable or indecipherable. Failure or negligence to destroy patient records in a manner that fails to preserve the confidentiality of personal information is a violation of state law. Persons injured because of a dentist’s abandonment of patient records may bring action in court against the licensee, partnership, or corporation, if applicable.

If hiring a records disposal company, choose one that specializes in destroying records by burning or shredding. Radiographs should be separated from the paper files and, due to the silver content on the film, disposed through a silver recycler, hazardous waste vendor, or household hazardous waste program that accepts small business hazardous waste. **A log should be kept of which records are destroyed and when.** The log will assist you in identifying which records have been destroyed and which are available in the event they are requested later.

**Q:** Is it against HIPAA regulations to have the day’s schedule posted to the wall in a operatory?

**A:** It is a violation of the HIPAA rules to have the schedule showing patient names and procedures to be rendered where other patients can see it. You cannot even have a sign-in sheet showing patient names.

Responses provided by **Kathleen Johnson**, President of Kathleen Johnson Consulting.

## Quote-Worthy

“ Always render more and better service than is expected of you, no matter what your task may be. ”

—Og Mandino

# Focus on Dentistry, Not Financing Debt

By Teresa Duncan, M.S.



One in five people do not understand their benefits, according to a 2013 Metlife publication “Elevating the Value of Dental Benefits Through Employee Communications.” If they’re not sure what’s in the policy, you can bet they’re not sure about their maximum or deductible or when they apply. If they are unsure of their benefits, then they’re even more unsure about their out-of-pocket responsibilities. Luckily, we have electronic (translation: quick!) methods of finding out benefit levels and expected copayments.

When we give patients an estimate for payment, it can sometimes be overwhelming. It’s not easy to hear about an unexpected bill. That’s why you need to be prepared with payment options. You will need them not only for unexpected copayments but also for patients who visit a specialist’s office. Third party financing is a tremendous help for these patients.

A common dilemma occurs when a patient chooses an office after they’ve visited another practice. Many times their maximum is exhausted or very close to depletion. Proper treatment planning and fee presentation skills are essential to assist the patient in choosing a personalized financing option that works. Every situation is different.

For example, take Mark and Carrie’s unique circumstances. They both need help financing their treatment and cannot depend on insurance coverage to ease their financial burden.

**CASE 1:** Mark recently moved to the area from across the country. Tooth #14 was treated endodontically earlier this year. Mark has delayed moving forward with a crown because he thought his life was too hectic to proceed with treatment.

Mark’s endodontic evaluation and treatment has consumed over \$1100 of his \$1500 maximum. Your crown fee is \$1300. Let’s talk to him about his options.

**TREATMENT COORDINATOR (TC):** “Mark, I’m happy you’ve chosen us. I know you had your choice of offices and we’re glad you landed in ours. Your root canal therapy used up all but \$400 of your maximum. The fee for the crown is \$1500 — we’re going to estimate that your portion will be \$1100. How do you plan to take care of that?”

**MARK:** “I knew this day was coming. To be honest, I really haven’t saved for it at all.”

**TC:** “Mark, that’s okay. Are you interested in breaking up the amount into smaller payments?”

**MARK:** “Can I do that? I can pay \$100 a month; would that be okay?”

**TC:** “Definitely. We partner with a financing company that allows you to pay off the balance over time. The application is right here. Take a few minutes to fill it out and I’ll submit it for approval.”

Mark is happy because he can afford an extra \$100 a month but not \$1100 at one time. You’ve enabled him to quickly receive treatment and pay for it at his own pace. He will remember how easy it was to make arrangements. Happy patients will send more patients.

**CASE 2:** Carrie is busy planning her October wedding. The doctor and Carrie have agreed to a comprehensive course of action that includes bleaching, replacement of fillings, and new anterior crowns and veneers to give her a beautiful wedding day smile. She is now ready to begin the third phase but has just realized she may be over budget for her wedding. Your receptionist tips you off that both bride and groom expect a large number of wedding gifts and are confident the balance can be settled after the “big day.” She knows this because Carrie likes to chat with her before appointments.

Carrie’s payment history has been stellar, so you are not concerned with her ability to repay; however, your office’s financial guidelines do not provide for payment after treatment has been rendered. This conversation is necessary not because she needs an affordable monthly payment; Carrie needs an alternate funding source and, in your small business, you simply cannot afford to fill that job. Your conversation may take this tone:

**TC:** “The big day is coming up! Your smile is going to be beautiful in your pictures. Jean tells me that your budget is going crazy. Tell me how I can help you.”

**CARRIE:** “Well, the flowers cost more than I expected and we’ve had to expand the guest list. I know I’m going to receive some large cash gifts so I know I’ll be able to pay you. Can I write you a check after I get back from the honeymoon?”

*continued on page 4* ►

continued from page 3

**TC:** "It sounds like you need to delay the full payment for two months. Is that right?"

**CARRIE:** "Yes, you know I'm good for it."

**TC:** "Of course, we've worked together long enough to know that. I can help you to obtain the financing to pay your portion and then after the wedding you can either pay them back in full or make monthly payments. After the wedding and honeymoon, that option may come in handy. It won't take me long at all to obtain approval with your good payment history. Would you like to complete an application?"

**CARRIE:** "If that means we can get started with the crowns and veneers, let's do it."

**TC:** "Fantastic! And I hope you'll remember to send us a postcard from your honeymoon!"

Both patients needed additional funding but for very different reasons. A third party financing company provides options to your patients that are just not feasible for a small business to offer. The ease and convenience of the application and approval processes far outweigh the risks of carrying potentially delinquent debt. Reduce your risk and increase your collections ratio by offering options for financing. Leave debt to the experts in financing; that's not your focus!



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## Reminder: Update Financial Consents

Trojan Professional Services, Inc. has consistently required its clients to obtain a financial consent for each patient that is not more than one year old from the date of service in question. This is a matter of best practices. Over time, even a short period of time, circumstances may change significantly for a patient and/or the financially responsible party. If an account placed with Trojan for collections is disputed, we will contact your office and request the validation. Trojan requires the validation to include the itemized statement and signed financial consent (not more than one year old from the date of service). If we do not receive this information, Trojan may not be able to pursue the account.

**Trojan's Collection Services Department can be reached at 800-248-2964.**

## What Clients Say

"Our dental office has had great success using Trojan Collection Services. We have used other collection agencies in the past and none have compared to Trojan. Thanks to Trojan, our office has received money on overdue accounts that we otherwise would've had to just write off."



—Ashley, Office Manager



GREAT NEWS! Trojan is converting to paperless invoicing **starting July, 2015,** and we want to thank you for joining us in our efforts to

# GO GREEN!

Please call us today at **800-451-9723, option 4,** to update your account with your current **billing** email address.

You may also log onto **[www.trojanonline.com](http://www.trojanonline.com)** for the option to print and fax us your billing email address or to opt out of the eStatement service and continue receiving paper statements.



*Trojan's mission is to employ exceptional people, give superior service, and provide a positive work environment.*

TROJAN PROFESSIONAL SERVICES

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