The Small "Yeses" That Add Up to Treatment Acceptance

If you've been in practice for any length of time, you have experienced situations where some patients immediately schedule care while other choose to leave without committing to the dentistry they indicated they want. Often patients' barriers to care revolve around cost, priorities and fear. And once they leave the practice, their decision-making process is lengthy and complex. Recent research, Patients' Decision Path to Purchase Dental Care Study, found that even though the majority of patients believe that dental care is an absolute necessity, when an out-of-pocket investment is required they take an average of 69.8 days to decide to move forward with care.

Create A Clearly Defined Decision "Path" In Your Practice

Understanding the decision-making process allows the team to proactively address barriers and help the patient commit to care. Between the examination room and the exit door, we have found there are five "decision points" or steps where patients have the opportunity to say "Yes." When patients say "Yes" at each of these points, you know they have the information and solutions they need to commit to treatment. Of course, not all patients will accept recommended care. In my opinion, true treatment acceptance — which is patients accepting all recommended, needed care and not just the minimum — should be around 67%. We have found that one-third of patients will accept care, and one third of patients will NOT accept care, no matter what. It's the

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remaining third who may be guided to accept care by using the five-step decision path process.

Step One: Find And Verify The Patient's Personal Motivator

The first step is to identify what is motivating the patient to even consider dental care. Every patient is different. Some may have a health history that drives them to attain good oral health. Others may hold a job where a bright and beautiful smile helps them succeed. To identify the personal motivator, ask each patient two questions:

"What do you want for your oral health and smile?" And "why?"

Once you know the patient's personal motivator, you can begin helping them with their decision-making process and get the first "Yes" by asking:

"If we can deliver the dentistry you need to achieve your goal of (personal motivator here), would you want to invest time in your oral health and schedule care?"

Step Two: Use a Healthy Mouth Baseline

"A Healthy Mouth Baseline is what you and your team believe every single patient deserves to have for his or her oral health." It's important to give patients an understanding of what oral health means to them in terms of their overall health, the appearance of their optimal teeth and gums and the care required to achieve health. We call this a Healthy Mouth Baseline. A Healthy Mouth Baseline is what you and your team believe every single patient deserves to have for his or her oral health. The Healthy Mouth Baseline is communicated to all patients along with the "why" you, as a dental professional, are committed to helping patients achieve this goal. For example:

"Mrs. Jones, our team has what we call a Healthy Mouth Baseline, which is the care needed to ensure your optimal teeth and gums are in good health, without disease. As your dental and health advocate, I believe every one of my patients needs to be healthy. Do you agree?"

Step Three: Let Patients Know If They Have Problems

It's important to be very clear with patients what their oral health "problems" are. If they don't "own" or believe they have dental issues, then they would not have a reason to even consider treatment as a solution. The best way to communicate to patients your areas of concern is to use visual aids like intraoral photos to provide proof and let patients see what's going on in their mouths.

For example:

"Mrs. Jones, do you see this cracked tooth here? This is going to be a problem for you if you delay taking care of it. It will eventually break, which may result in discomfort and additional cost. Is this something you want to take care of now to avoid the inevitable issues when it breaks?"

Step Four: The Team Transfer

In this fourth step, the patient is transferred between the treatment discussion and recommendation to the front office team. It's important at this step to reiterate for the patient:

- Their personal motivator and goals for their oral health
- The practice's Healthy Mouth Baseline
- The doctor's treatment recommendation
- Their desire for care

For example:

"Mrs. Jones, this is Mary, our financial coordinator. Mary, Mrs. Jones told me she is interested in dentistry that enables her to (personal motivator here)."

"Mary, we also discussed our practice's Healthy Mouth Baseline and Mrs. Jones agreed that she deserves to be healthy and disease free." "Doctor has shown Mrs. Jones the cracked tooth that is concerning him and Mrs. Jones agreed she would like to move forward with Doctor's recommendation. Did I communicate everything accurately to Mary, Mrs. Jones?"

Step Five: Fit Treatment Into the Patient's Lifestyle

The previous steps have been designed to help the patient answer the question, "Should I get this care?" Along the path they have been presented with the information needed to clearly understand why they

should accept recommended treatment: it achieves their oral health goal, it is the level of care they deserve and it solves a problem that they have in their mouth. The last step is to answer the question, "Can I get this care?" and remove any barriers — usually time and cost — that may prevent them from committing to needed dentistry.

"At each of the five steps, the patient has the opportunity to better understand the care needed and how it personally benefits them."

For example:

"Mrs. Jones, we've agreed to move forward with treating your cracked tooth. I want to make sure we're clear about your financial responsibilities and

payment solutions and get your time with the Doctor scheduled. The good news is you have insurance that will contribute to your care. The total cost of the dentistry is \$XXX. With what we expect your insurance to contribute, you have an out-of-pocket investment of about \$XXX. When patients have an out-of-pocket investment, I always let them know we have a financing solution should they prefer to pay over time. So, Mrs. Jones, if we have a payment solution that works for you and can provide a convenient appointment, can we get you on the schedule right now?"

At each of the five steps, the patient has the opportunity to better understand the care needed and how it personally benefits them. Each of the five smaller agreements makes it easier for patients to commit to care, especially when the team offers financial and scheduling solutions that work for the patient. If a patient says "No" along any of the steps, it may indicate they need or want more information or have concerns. This gives the team the opportunity to provide more in-depth details or solutions while the patient is in the office, instead of them leaving and taking, according to the research, almost 70 days to decide to accept care.



Gary Kadi has been a devoted advocate for the dental community, their families and their patients for over 20 years. A speaker, author and researcher, Gary re-energizes practices and helps dentists implement systems and raise their profit margins. Gary has authored several books, the first of which, *Million Dollar Dentistry*, has been distributed in 37 countries with over 80,000 copies in print. He most recently wrote a book for periodontists, *Stop! The Bleeding: The Seven Steps to Scaling Your Perio Practice.* After years of studying the reoccurring challenges facing dentists, he created NextLevel Practice to implement the Complete Health Dentistry[™] business model. NextLevel Practice is an Inc. 500/5000 company. Gary is a Leader in Dental Consulting as named by *Dentistry Today*, a member of The Academy of Dental Management Consultants, and an honored Board Member of Alliance for Oral Health Across Borders. He is the Chairman of Partners in Complete Health, and he is an Advisory Board Member for the Dr. Edward B. Shils Entrepreneurial Education Fund and the American Academy of Oral Systemic Health.

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