

RELATIONSHIPS TRUMP COMMODITIES

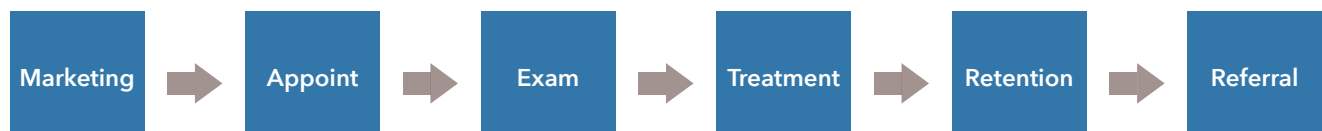
BY MARK T. MURPHY, DDS, FAGD

Often patients only do what is covered by their insurance or search for the lowest fee. Dentistry seems to be thought of more as a commodity today than ever before. Fee advertising, declining insurance reimbursements, discounting and other real forces are at play here. Yet the single biggest reason that dentistry has moved away from individualized, relationship-based, comprehensive care delivery model is that **we have allowed it to happen**. That is the good news! It means we can change it. Not overnight, not without work and not by doing the same thing over and over hoping for a different result. That was Einstein's definition of insanity. Instead, we can focus on inviting ourselves, our teams and our patients back towards developing stronger relationships that support better dental healthcare decisions based on trust - not just what is covered by insurance.

Relationships grow out of the touch points we have with people. Every time we speak, meet or communicate with a patient we have the opportunity to create an environment that is either commoditizing or engaging. These nodes are touch points that we can consciously map out and manage to improve the desired outcomes. I am not saying that if we do everything right, every patient will grow into such a strong relationship with your practice that fee and insurance reimbursement will not matter. Rather, I am proposing that some will embrace the paradigm shift they experience. We only need a few patients growing into stronger relationships with us to foster better patient retention, improved case acceptance, economic prosperity and a more fulfilling practice experience for our team. Let's take a look at how we could do this.

Create a Map of the Territory

One way to look at the patient-practice touch points is to identify the communications we have with clients. These can be on the phone, in person or through electronic or print media and correspondence. Your growth strategy and tactics likely include some combination of external and internal marketing to attract new patients. Once they know about you, they may choose to call, appoint, visit, spend time and money with you and then return for future care and maintenance. If everything goes well they may even refer friends to you. All of those are touch points that we can map and manage to strengthen relationships and weaken the commodity perception. The goals as we select behaviors at these nodes are to create an environment where some/more of our patients might choose to grow their relationship with our team and us. When your marketing efforts pay off and a patient becomes aware of you, they may choose to pick up the phone and call to appoint. You will then do a new patient examination on them, diagnose their current state of dental health and recommend treatment. They may follow through, return for periodic re-care as needed and in best-case scenarios, trust you and the practice so much that they refer their friends and family. The map of these simplified touch points may look like this.



We could select appropriate behaviors at each of these nodes and improve the relationship. If we do, some, (not all) of our patients will choose us over the commodity discount covered by the insurance model. This will protect our practice during challenging economic times as reimbursement models continue to fall behind reality. We can save the discussion of how dental benefits are NOT really insurance at all for another time. They are a discount maintenance benefit at best!

So let's use this process map and brainstorm a few ideas/constructs/solutions around the touch points that could influence results. Then, you and your team can add to them and prioritize the larger list as a start towards designing a strategic growth plan that helps you prosper.

Marketing

- Most practices report that new, quality patients come from word-of-mouth referral (more on that later).
- Make sure your website communicates the brand and value proposition that you intend.
- Have all external communication and marketing pieces of high quality and consistency. And that includes your physical space, from reception room through the operatories.

Appoint

- Create a specific, clinical reason for patients to want to come back for their next appointment (place/repair/replace this restoration).
- "Person"alize the confirmation text, email, card or call with appropriate language (appoint with a person rather than for a procedure).
- Connect the scheduled next visit with the clinical outcome that the appointment is for (at that time we will complete the restorations so you will not have any problems with that area in the future).

Exam

- **Ask** the patient questions about what you see rather than **telling** them about what they need to do. Help them come to own the problems and want a solution.
- During the exam, involve the patient in the exploration and discovery process (intraoral camera or mirror) so that they may become curious about the health of their mouth.
- Don't "sell" the dentistry or restorations. Instead talk about the features, advantages and benefits OF the restoration or solution (when we fix that tooth, would you prefer a solution that will last several years or one that might even last the rest of your life?).

Treatment

- Consider phasing larger cases if money is an issue. You can always put out the dental, periodontal and occlusal "fires" without completing the entire restorative plan. Staging the treatment when you have the breakdown under control is easy.
- Provide payment options using external financing partners like CareCredit. Patients often make larger investments when an option with monthly payments is available.

Retention

- Make sure hygiene patients always (>90%) leave with a specific next re-care appointment time and date.
- Create value for their next appointment by identifying and documenting any periodontal defect or area of concern. Revisit that area first when they come back.
- Get to know your patients and celebrate meaningful events in their lives with them. People spend more time with those who care about them, their family, friends and events.

Referral

- Identify a few choice patients in the morning huddle you can ask for referrals.
- Role-play and draft personal scripts for asking patients to refer their friends.
- Reward (at least acknowledge and/or celebrate) patients who refer new clients to you. You might even call the referrer before the new patient comes in to thank them and learn about whom they sent.

This is not meant to be all-inclusive or a complete list of behaviors we can choose to impact results. Start here with your team and build upon what I have provided. Then prioritize and select the ones that are right for your team. Execute them in a strategic plan that includes measurement and celebration of and repeat.

Relationship	Action
Advocate	Refer a friend
Partner	Return for re-care
Client	Completes care
Customer	Call and appoint
Prospect	Heard about you
Suspect	Don't know you

There is a progressive language in business that roughly correlates to patient engagement levels: Suspect, Prospect, Customer, Client, Partner and finally Advocate. Our patient's actions can be indicative of where they are on this continuum. As you choose to create more engaging activities at patient touch points you will see the relationship grow, mature and bear fruit. Our rewards from this profession are both financial and spiritual. The warm fuzzies we get from patients are just as important as the checks. Enjoy! ■



MARK T. MURPHY, DDS, FAGD

is the Principal of Funktional Dental and the Lead Faculty for Clinical Education at MicroDental Laboratories. He also serves on the Adjunct Faculty at the University of Detroit Mercy School of Dentistry and as a Guest Presenter at Mercer Advisors and the Pankey Institute. Through his lectures about practice management and clinical dental issues, Mark helps teams and dentists employ an evidence-based approach in their practices.

This content is subject to change without notice and offered for informational use only. You are urged to consult with your individual business, financial, legal, tax and/or other advisors with respect to any information presented. Synchrony Financial and any of its affiliates, including CareCredit, (collectively, "Synchrony") makes no representations or warranties regarding this content and accept no liability for any loss or harm arising from the use of the information provided. All statements and opinions in Relationships Trump Commodities are the sole opinions of the speakers. Your receipt of this material constitutes your acceptance of these terms and conditions.

Mark T. Murphy collaborates with CareCredit to develop educational materials for the dental industry.

Compliments of



800-859-9975
www.carecredit.com