DocTalk

Front Office Impact—You don't get a second chance to make a good first or last impression

It is self-evident that a dentist who is able to build rapport will have the greatest chance of repeat business from a patient. However, to focus solely on the dentist's relationship with the patient is to ignore a significant part of the patient's experience. This experience begins before and ends after they have seen the dentist.

The patient's dental experience begins and ends at the front office with the front office staff. They handle the patient's first impression (which will influence whether an initial appointment takes place) and the last impression (which will influence whether the patient will come back). If dentists don't observe and monitor these interactions with the patient, there is a good chance that a huge potential for growth in the practice is being ignored.

First Impressions

It is important to look at this first impression that your practice is making with the outside world. Make sure that you are putting your best foot forward and thereby maximizing your chances of converting inquiries into patients.

When you think about it, by the time a non-patient calls the practice to make an inquiry, three quarters of the work getting a new patient is done. The non-patient has seen your marketing (*or been referred to you by their dental plan*), he or she are interested and has taken time out of his or her day to give you a call. All that remains in the equation is the skill with which the inquiry is handled. It will literally determine whether the inquiry is converted into an appointment.

The appointment book dictates everyone's day in the practice. Patients' choices of appointment have to be strongly guided by the front desk. In turn, the front desk team needs strong appointment guidelines from the principal dentists. If you hand control of the appointment book over to the front desk without guidelines and protocols, there is a very good chance that many days will be chaotic for the whole practice.

These appointment protocols should include:

- Dictating which procedures go on certain days at certain times. You could have 12 checkups on any given day, or four extractions, one after the other, or three consecutive root canals. This can be stressful or boring for everybody and cause wild swings in cash flow.
- Guiding the patient's choices towards empty spaces in the appointment book. Otherwise there could consistently be times where no patients are booked in.
- Determine the amount of time for given procedures
- Setting the practice's and clinician's available hours.
- Where to put emergency patients.
- Deciding how much notice the practice requires for cancellations.

How can we help you?

Do you have questions regarding Dental Health Services' Quality Assurance Program or any other services we provide?

Your Service Specialist is available to answer all of your questions!

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QUESTIONS OR COMMENTS? CONTACT US!



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Communicating these protocols to the patients in the right way takes training and practice. The front desk needs to know how to set up expectations correctly with the patient and how to handle a patient's disappointment when they can't come in whenever it is convenient for them.

If the team has good rapport with the patients at this point, there is a much higher chance that the patient will reappoint. If the front office isn't polished, there is a chance that any doubts that were already in the patient's mind about the practice and dentist are further cultivated.

If you remain unconvinced of the impact that the front office team make, look at the small service businesses that you frequent and refer clients to over the next few days (the place you buy coffee or get a haircut for example).

Recognize how much your loyalty is influenced not just by the product but by the polished communication skills and systems in place. This will often influence whether or not there will be a repeat visit.

The same is true of a dental practice. The patient's experience and loyalty is guided by their whole experience in the practice. Regardless of how good a dentist you are, a disorganized or inappropriate front desk person can undo any goodwill that you have built.

From the moment the patients call or come in until the moment they leave, they are forming an opinion of you, your services and your practice.

Can you afford to leave this experience to chance?

Sources: <u>www.agd.org</u> <u>www.primepractive.com</u> <u>www.hr.com</u> www.ada.org

A...B...Cs

Accurate Billing Codes

In an effort to assist our offices in utilizing accurate CDT billing codes, we have started the ABCs section of our newsletter. Most extractions other than wisdom teeth would fall into the category of routine (D7140). Surgical extraction codes (D7210) are used <u>only</u> when:

- A.
 - a mucoperiosteal flap is elevated and
 - B. either the tooth is sectioned <u>or</u> bone is re moved in order to remove the tooth

Documentation should include the complete procedure including sutures necessary to close the flap.

D7140 extraction, erupted tooth or exposed root (elevation and/or forceps removal) Includes routine removal of tooth structure, minor smoothing of socket bone, and closure, as necessary.
D7210 surgical removal of erupted tooth requiring elevation of mucoperiosteal flap and removal of bone and/or section of tooth Includes cutting of gingiva and bone, removal of tooth structure, minor smoothing of socket bone and closure.

Sneak Peak into the next DocTalk feature article: Dental Insurance versus Dental Plans

We at Dental Health Services understand that most offices have to administer many different Dental Benefit Plans and Dental Insurance Plans, each that have their own set of coverage.

Dental Health Services is not Dental Insurance, but rather a Dental Plan that provides Dental Benefits. The company is licensed and overseen by the Department of Managed Health Care in California and the Office of the Insurance Commissioner in Washington.

The <u>important</u> differences between a Dental Plan and Dental Insurance are....

Stay tuned for your next DocTalk Newsletter!