Great Answers
to Tough Patient Questions

Oklahoma Dental Association
Annual Meeting
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Great Answers to Tough Patient Questions

About the Course

A no-nonsense approach for working with difficult patients will encourage a calm, positive attitude about dentistry as well as patient satisfaction. This true-to-life course provides great answers to 20 of the most difficult questions in dentistry, ranging from appointment complaints, treatment concerns, and financial objections. You will learn to turn challenging conversations into a chance to sell patients on your dental practice. By responding well to patient concerns, you will solve patient problems in less time, convince patients to follow treatment advice, increase referrals and reap the benefits of patient satisfaction.

- Present a positive image of a caring, quality practice
- Solve patient problems in less time
- Motivate patients toward treatment acceptance
- Reach agreement with angry and confused patients

This “true to life” seminar is based upon research and interviews with dental teams across the U.S. It features patient issues that “bug” dental offices most, critiques the answers practices are giving now, and presents strategies that you can adapt to your personal style. Learn which answers work, and which don’t. An interactive seminar for the entire dental team.

About the Speaker

Robin Wright, PhD has an international reputation as a dental communication specialist. She has presented over five hundred seminars, including the Yankee, the Hinman, the Chicago Midwinter, the ADA Annual Session, and the AAPD Annual Meeting. She is a featured speaker in the ADA’s seminar series. Her combination of humor, enthusiasm and expertise make her a powerful speaker. She is President of Wright Communications and lives in Evanston, Illinois.

Robin holds a doctorate in healthcare communication from Northwestern University and a master's degree in communication from the University of Illinois at Urbana. She has taught communication courses at four universities.

Introduction

Seven Essential Truths of Tough Questions

1. The 90/10 Rule applies
2. More patients are bothered than you think
3. Questions and complaints are good
4. You know the answers
5. Your talk counts more than your treatment
6. Finesse only takes you so far
7. Emotional support works better than you know it should

Research Summary of Patient Concerns

<table>
<thead>
<tr>
<th>Category</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reception</td>
<td>24%</td>
</tr>
<tr>
<td>Treatment</td>
<td>47%</td>
</tr>
<tr>
<td>Finance</td>
<td>29%</td>
</tr>
</tbody>
</table>

Reception Concern Categories

- Appointment Promptness
- Parents and Children
- Appointment Times
- Appointment Delays
- Health and Dental History Forms
- Late Patients
- Appointment Refusal/Cancellation
- Dentist Competence
- Appointment Knowledge
- Questionable Emergencies

Treatment Concern Categories

- Treatment Suitability
- Treatment Need/Diagnostic Accuracy
- Fear/Pain
- Treatment Safety
- Treatment Quality
- Treatment Understanding
- Relationships
- Colleague Evaluations
- Treatment Immediacy/Severity

Finance Concern Categories

- Dental Benefit Coverage
- Fee Comparisons
- Payment Procedures
- Managed Care Plans
- Specific Treatment Fees
- General Fee Amounts
Smart Strategies for Tough Questions

- Get privacy
- Listen well and longer than you want to
- Stay calm
- Don’t sweep concerns under the rug
- Don’t get snotty, even when they deserve it
- Voice the patient’s point of view
- Support the patient’s emotional response
- Begin with an area of agreement
- Give a quick solution if there is one
- Don’t tell too much
- Ignore unfair criticism
- Don’t roll over and play dead
- Add a compliment if you can
- Keep them posted on your progress and the outcome
Patient Questions in Reception

Please assess the following possible answers to patient questions in reception. Which do you like (or HATE) and why?

Why don’t you have an opening sooner than that (or at the time I prefer)?

It is certainly frustrating when the times you want are already taken. Let’s schedule you so you have an appointed time. And I’ll put you on our special call list if an earlier appointment opens up.

I don’t know when a good appointment time would be. Can’t I just call you?

Certainly, but the times you prefer do book up fairly quickly.

I’m in pain and need to see the doctor right away. No, noon isn’t good. No, 4 isn’t either.

I’m sorry, but noon and 4 p.m. are our only times available. I urge you to pick one. I would hate to see you even more uncomfortable tonight. Do you prefer one of those times, or shall I check on available times for tomorrow?

Why are you running behind?

The doctor is tied up with a difficult case and will be with you shortly.

Sorry I’m late. You can still see me, right?

We cannot inconvenience our next patient and encroach on their time.

Is the doctor any good?

Yes! The best! That’s why I love working here.

Why don’t you let parents in the treatment room?

Children behave best in the absence of their parents when there is a need for their total attention.
Promote Treatment Acceptance

Be Organized with Your Case Presentation

Classic Case Presentation Outline

- Review of patient concerns, priorities and medical history
- Dental conditions
- Result of no treatment
- Treatment recommendations
  - Treatment benefits
  - Treatment limitations, uncertainties, risks
  - Examples of previous cases and their success
  - Expected treatment results
- Treatment alternatives
- Post-treatment expectations
- Patient questions and objections
- Financial arrangements and scheduling

Cosmetic Care Presentation Outline

- Review of patient priorities in terms of appearance and aesthetics
- Treatment benefits
- Expected treatment results
- Examples of previous cases and their success
- Explanation of treatment procedures
- Treatment limitations, uncertainties, risks
- Treatment alternatives
- Post-treatment expectations
- Patient questions and objections
- Financial arrangements and scheduling

Be Convincing about Treatment

- Create a positive experience
- Begin with an outline
- Appeal to patient values and priorities
- Don’t do all the talking
- Don’t tell them what you would "like" to do
- Don't refer to teeth by numbers
- Use more patient examples
- Use appropriate humor
- Watch your delivery when discussing treatment alternatives
- Compare the treatment to alternatives in terms of advantages and disadvantages
- Appeal to benefits
<table>
<thead>
<tr>
<th>Treatment Benefit Cheat Sheet</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Dental Amalgam Restoration</strong></td>
</tr>
<tr>
<td>Supports and protects the tooth</td>
</tr>
<tr>
<td>Protects from future discomfort and infection</td>
</tr>
<tr>
<td>Affordable</td>
</tr>
<tr>
<td>Durable and long-lasting</td>
</tr>
<tr>
<td><strong>Bleaching and Whitening</strong></td>
</tr>
<tr>
<td>Improved appearance for clients, family</td>
</tr>
<tr>
<td>More self-confidence</td>
</tr>
<tr>
<td>Gives back the brightness of your smile</td>
</tr>
<tr>
<td>Affordable</td>
</tr>
<tr>
<td>Easily maintained</td>
</tr>
<tr>
<td><strong>Inlays</strong></td>
</tr>
<tr>
<td>Looks very natural; virtually invisible</td>
</tr>
<tr>
<td>Supports and protects the tooth</td>
</tr>
<tr>
<td>Protects from future discomfort and infection</td>
</tr>
<tr>
<td>Preserves tooth structure</td>
</tr>
<tr>
<td>Durable and long-lasting</td>
</tr>
<tr>
<td><strong>Bonding</strong></td>
</tr>
<tr>
<td>Quick and comfortable procedure</td>
</tr>
<tr>
<td>Change the shape or color of your teeth</td>
</tr>
<tr>
<td>Improved appearance for clients, family</td>
</tr>
<tr>
<td>More self-confidence</td>
</tr>
<tr>
<td>Looks and feels very natural</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td><strong>Fixed Bridge</strong></td>
</tr>
<tr>
<td>More comfortable when you eat, speak and smile</td>
</tr>
<tr>
<td>Better function when you speak and chew</td>
</tr>
<tr>
<td>More stable, not wobbly</td>
</tr>
<tr>
<td>Feels light, not heavy</td>
</tr>
<tr>
<td>Food doesn’t get caught</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td><strong>Periodontal Care</strong></td>
</tr>
<tr>
<td>Keep your teeth a lifetime</td>
</tr>
<tr>
<td>Protection from future discomfort and infection</td>
</tr>
<tr>
<td>More affordable dental care</td>
</tr>
<tr>
<td>Fresher breath</td>
</tr>
<tr>
<td>Improved appearance for clients, family</td>
</tr>
</tbody>
</table>
Patient Questions about Treatment

*Treatment Suitability*

I read on the Internet that there are other ways to treat this.

You know, I could just get this tooth pulled. That would be cheaper than a crown, right?

*Treatment Need/Diagnostic Accuracy*

I don't have time for this right now.

My previous dentist never said anything about gum disease. How long have I had it?

*Fear/Pain*

I'm worried it's going to really hurt.

*Treatment Quality*

Why is Johnny crying and his face so red? Did you have a problem?

Do you guarantee your work?

I'm thinking about getting a second opinion.
Managing Effective Financial Discussions

<table>
<thead>
<tr>
<th>Two Difficult Issues in Fee Discussions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cost fairness</td>
</tr>
<tr>
<td>Is this office honest in setting fees?</td>
</tr>
<tr>
<td>Could I buy the same service from another dentist for less?</td>
</tr>
<tr>
<td>Treatment value</td>
</tr>
<tr>
<td>Is the treatment worth the price?</td>
</tr>
<tr>
<td>Will I get something I need or want for my money?</td>
</tr>
</tbody>
</table>

Communication Outline for Business Managers

- Review the written treatment plan
- Review the financial policies of the practice
- Document the discussion

Sample Financial Policy Statements

Financial Arrangements

- We expect payment from our new patients at the time of the visit, regardless of dental benefits coverage. We accept cash, checks, and credit cards.
- You have the most important role in controlling your dental care costs. If you practice prevention, you will gain the benefits of good oral health and smaller dental bills.
- Payment in full at the start of treatment with cash or a check earns a complimentary discount of five percent.
- This practice accepts the following two major credit cards:
- Patients may prefer to make arrangements with a bank or credit union for the amount of the treatment, making monthly payments to the lending institution.
- For our patients without dental insurance, we require 50 percent of the total fee at the start of treatment. The balance will be due at on a 60-day payment schedule.
- Finance charges are added to accounts every 30 days at 1.5 percent of the unpaid balance.

Dental Benefit Plans

- We promise to base your treatment on your dental needs, not your insurance policy.
- Although you have insurance coverage, some procedures may not be covered. A deductible or a co-payment may be required. Our business manager will be happy to review your dental benefits coverage with you.
- For our patients with insurance, we will be pleased to assist in filing a pre-determination with the dental insurance company. Payment of the deductible and 50 percent of the co-payment is required at the start of treatment. Any balance will be due on completion of the treatment.
- Your level of insurance coverage is determined by the policy your employer selects. If you think your coverage is insufficient, you may wish to address this with your employer.
- You are the most important person regarding your health. After consulting with us, you ultimately decide whether a treatment is right for you. Therefore, you are responsible for payment regardless of insurance coverage.
Patient Questions about Finances

General Fee Amounts

How do you set your fees?

I saw the doctor's new car. The office must be doing really well.

Fee Comparisons

I'm calling around for prices. How much is a full set of veneers?

Treatment Costs

Thirty years ago a filling cost one-third that much.

Payment Procedures

Please bill my child's jerk of a father for the treatment. (divorced mother)

Dental Benefit Coverage

I have insurance. Why do I have a bill?

Maybe I should wait. Maybe under Obamacare I'll have better dental coverage.

I really like it here, but I'll get a discount if I switch to a dentist on this list.