

**Ep #24: How to Turn Your Front Office Team into
Customer Service Rockstars**



Full Episode Transcript

With Your Host

Dr. Tarun Agarwal

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Ep #24: How to Turn Your Front Office Team into Customer Service Rockstars

Welcome to *T-Bone Speaks* with Dr. Tarun Agarwal where our goal is to change the way you practice dentistry by helping you achieve clinical, financial, and personal balance. Now, here's your host, T-Bone.

T-BONE: Alright everybody how's everybody doing today, I hope you're doing well and you're having a good car ride. Today I have a wonderful guest it's my first team member guest from the front office at least. So I have Laura Hatch with us who is the office manager at her husband practice Tony Hatch's office and they are in Scripps Rock

LAURA: Scripps Ranch.

T-BONE: Scripps Ranch outside the San Diego so from now on we'll just say San Diego.

So Laura how are you doing today?

LAURA: Awesome thank you for having me. This is awesome.

T-BONE: It's great you know I create a little podcast to get around with me so that when I run into people at meeting and stuff I like to do face to face because there's something about looking into somebody's eyes and having those conversations.

LAURA: So I'm the first team member you've had on?

T-BONE: First front office team member.

LAURA: Well I'm excited. I had no idea.

T-BONE: Yes, you know because yes you're the first front office team member I interviewed one of my treatment coordinators but I haven't posted it yet, but I don't know why I haven't, actually.

LAURA: And I have a cross for so long because I'm in CEREC community with my husband but we haven't talk about front office so I'm excited.

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T-BONE: Yes, I think we're here with Revenue Well this weekend in Chicago and I think one of the things I was really thinking about is - from the dentist perspective the front office honestly doesn't get any love from me.

LAURA: Not just you.

T-BONE: No, no but when I say me, it's dentist in general because I was like out of my mind because I take care of my hygiene department. I go in the room and check right, I take care of my assistants because again they're there literally with me chair side day to day everything but my front office people I literally see them in the morning for fifteen minutes I'll say hello maybe at lunch and I may have little interaction with them throughout the day so they get the least of my love from the office so let's talk about that a little bit.

LAURA: Awesome, I'm glad you actually recognized that because I think that the front office is kind of a forgotten area, it's also not.

T-BONE: People don't think of it as a production area.

LAURA: Exactly, right.

T-BONE: But it is a production area.

LAURA: It is I think that your front office makes or breaks your practice.

T-BONE: It kind of makes a wreck your practice.

LAURA: When you pay attention to front office is when they're not doing what you want them to be doing, when your schedules falling apart or when [crosstalk]

T-BONE: Reactive instead of pro-active

LAURA: Exactly, so the front office team really does need a love I mean my focus is on front office and all the staff members because they are the ones who makes your schedule great, they are the

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ones who make sure the patients arrive, and they are the ones that make sure that your day runs well.

T-BONE: They collect the money.

LAURA: Everything.

T-BONE: They are the customer service you know they are hopefully the pleasant voice on the phone.

LAURA: Exactly and one of the things that I'm big on is making sure that your front office team is trained well because like you said hygienist go and get CE they have to go get CE; dental assistants go and there's ...

T-BONE: So they go to dental CE at least

LAURA: Exactly, yes. Front office, we're not expected to do CE and we don't put a lot of attention on our front office team to make sure that they are doing the best they can and that they are trained the best they can and that they have the best systems and things like Revenue Well that's going to help

T-BONE: Systems, systems

LAURA: Yes, systems, exactly right.

T-BONE: Okay, so before we dive in to what you do and how you can help our audience listening learn, talk to me about who is Laura Hatch and how did you get into this and why should our listeners know you?

LAURA: Yes, well thank you. So I didn't get in to this because I was like a little girl that when I grow up I want to be a dental office manager. I met a guy in undergrad and I say what do you want to be when you get older and he said dentist or mechanic I'm not too fond of a dentist I'm like how about mechanic, my husband decided...

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T-BONE: Right well, at least it's just like a mechanic.

LAURA: Yes, exactly. He likes the tools so he decided to go to dental school so he graduated from dental school from the University of Maryland in '99

T-BONE: So UMBC

LAURA: Yes, exactly, first dental school in the world.

T-BONE: Maybe, I don't know

LAURA: Yes, that's one of their claims back then.

T-BONE: I think they're lying I'm sure Egypt had a dental school.

LAURA: But my background is human resources, management sales you know organization of development change management and so my husband came to me in 2003 and said I want to open a scratch practice. You run the front and I'll be in the back that would be amazing. So that's kind of how I fell into dentistry.

T-BONE: And that's in Baltimore?

LAURA: Baltimore, yes we have a practice outside of Baltimore but there's no place for us who don't have dental experience to go to school to learn how to be an office manager I mean I did not know.

T-BONE: It's a hot seat training.

LAURA: Yes, exactly I don't know services [unclear], I know customer service. I knew systems. I knew how to treat patients well and I learned the dental part of it and that's a big thing for me because I know a lot of people who are thrown at the front desk, we can teach them the dental we can teach them customer service and good personality and smile that's the kind of things that we need at the front desk.

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T-BONE: Or little things like you know just like I got a complaint the other day in my office that how come I don't know who I am talking to on the phone, I'm like how do you how does somebody not say their name like little things that when you integrate a new person I'm like how do you not say your name on the phone.

LAURA: Yes, exactly.

T-BONE: Where, where in la la land did you figure out that we stop saying our names to patients?

LAURA: Well, a small thing that's in my office I talk about all the time is smile. Smile is just something naturally that most people do but there are people who don't smile naturally and when a patient walks in your area, how do they feel welcome? Even if you're on the phone, you're doing something.

T-BONE: A smile is warm.

LAURA: Smile right, those little things.

T-BONE: We're in a smile business.

LAURA: Exactly, right so we help, I help my husband grow his practice in Baltimore and my intention was to live there forever but we went to a training in San Diego hygiene training seminar in the middle of the winter and in Baltimore its snowy and cold and freezing in San Diego it's sixty eight degrees and beautiful.

T-BONE: Year round.

LAURA: Year round, so we moved to San Diego in 2007 now we didn't really do our homework we kind of chase the weather that was the thing you know whether you live here right, we didn't realize Southern California has way more dentist than Maryland did.

T-BONE: Probably the entire city of San Diego, Southern California county has more dentist the entire state of Maryland.

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LAURA: Yes, exactly so competition is huge it's now 2008 so the economy is sanked and tanked and now we're twenty minutes away from Mexico so patients all the time say to us, "Oh I'm going to Mexico to get my dentistry done, in Maryland we didn't hear that at all but we just..."

T-BONE: I want an easy trip to Mexico...

LAURA: Yes, but you didn't have a lot of people going to Mexico maybe Canada or something but so but we open another scratch practice in San Diego we were looking to buy we didn't find anything we wanted and we just applied the same. We put our system there, we put our customer service there, we put our marketing in. I got my team trained up and we now have we started fee for service and we now have four doctors, we have fifteen days of hygiene, we have a staff of sixteen, we're fee for service in southern California so I feel that that training is necessary, and I know that so many dentists don't know what happens at the front desk. They don't teach this in dental school, you know they get out of dental school, you're dentist and then you have to run a business you have no idea so you walk up to the front office girls and you say fill my schedule then you walk in back and you cross your fingers and hope they know how to do it.

T-BONE: Well, you know you said something to me that I take, I want to correct a little bit ok, it's a yeah-but. It's an excuse that we as educators perpetuate and you said we work fee service and we have to train up an office up and I would say that you're in business and you have to train them.

LAURA: No, yes, completely.

T-BONE: I know that's what you meant, but too often when I hear from people well, ok she has to invest in front office because their fee for serve which is a total cap out BS answer, right? So I just want to make sure that I think we as educators can do a better

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job saying that some say because we're fee service we need to be even better because we're in business we need to be even better because we want our business to be great.

LAURA: Well I was just going to say the reason you need to be better at the front desk is because your patients have other things they want to spend their money on they don't like I mean they don't like coming to the dentist [crosstalk]

T-BONE: My patients love me.

LAURA: They spend thousands of dollars to throw on their teeth

T-BONE: For torture.

LAURA: Yes, exactly

T-BONE: They want to stick the isolate in their mouth and my patients like so I'm paying they literally say, so I'm paying you to do this to me and you're smiling?

LAURA: Yes, I just have never retreat down on my tooth one of my tooth third time on my tooth but I'm tying on the same tooth.

T-BONE: There's a thing called an implant.

LAURA: Well I think I'm going there next, hopefully not, hopefully this is the one but I'm lying there and I am a person who teaches how to teach yourself to sell-dentistry.

T-BONE: And it's two hour on the chair with the rubber dam on and it's like oh my gosh how long before this shit is over.

LAURA: Exactly, what I think is important is that they don't remember the dentistry, the patients they don't go out and talk about how great your over the test they really match my you know crown really well look at the margin on this, they go out and talk about your team, they go out and talk about your staff like the best customer service so they are very high tech. That's the thing

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that you need to focus on because there's a ton of competition out there the guy on the street can do it cheaper and

T-BONE: But we all have the same technology now, we're all digital practice; we're all photograph, photography.

LAURA: If you're not you should be.

T-BONE: We're all CEREC, we're all CONE BEAM at least the one listening to this podcast correct because the ones at the end of the day we always talk about people that we should be talking to but they never showed up for us to talk to them.

LAURA: Yes, right exactly

T-BONE: Alright so let me be [unclear] let's go here with these okay, I want you to dive into my practice ok and you don't even know my practice ok we're insurance based practice, we're PPO for five, six, seven networks. I would say that fifty to sixty percent of our patients have PPO insurance and we have a good team, we do great clinical dentistry, we treat our patients generally speaking very nicely, but I'm not happy with my front office team not because they are not good people I just feel that we could do better, we could take that one phone call and convert them and get a better relationship with them, where does somebody start that's doing well enough?

LAURA: Okay, so that's kind of the hole I was trying to fill when I started Front Office Rocks so that's the business I have.

T-BONE: So you have a business that does online for our listeners, you have online training dedicated for front office people.

LAURA: Yes, because like what I said in the beginning we don't put a lot of love on our front office team so you know so somebody comes in and they are brand new in your office and they are a go getter and they are excited and they love you know coming to the office and seeing the patients but overtime you get beat

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up by insurance you get beat up by that patients that's not nice, you get beat up by the doctor getting upset about, so we need to be refreshed, we need to be re motivated, we need to remember what that energy we have when we started and so Front Office Rocks, the idea behind it is that you can continue to train your team and then continually train them, keep that customer service in, keep the you know if you have an issue with all of a sudden a lot of people are cancelling let's go in and do so some video about how do we get our patients to show up where we have issues with you know making our schedule productive, all right let's go back to the training and see what system has fallen out, where can we go back to what we know which is how to schedule productively and you know everything that you turn in on.

T-BONE: Where is the starting point?

LAURA: For the training or for?

T-BONE: Yes, for the training, where does somebody start?

LAURA: Well, for me and you'll be going to love this I think the most important is the technology in the dental office, what would you say?

T-BONE: For me it's camera

LAURA: Okay, I would say it's the telephone.

T-BONE: Clinically it's camera, you see there's our biases correct? Your bias is front, my bias is clinical.

LAURA: I thought you're going to say CEREC.

T-BONE: No, no, no.

LAURA: I thought for sure you're going to say CEREC.

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T-BONE: When anybody ask me what is the best important investment I've ever made in my practice I always says it's my digital camera and on top of that it's the cheapest investment I've ever made in my office you know.

LAURA: Well for me it's the telephone I think the most important technology in the dental office is the telephone because if that phone is not ringing there's nobody coming into your office for you to take pictures with and do the crown on or whatever.

T-BONE: It's interesting I want to do a side bar on this telephone business you know I got suck into doing VOIP (voice over IP) and it was a disaster for our practice.

LAURA: I've heard that.

T-BONE: And you know, it was you know what, you don't have a fast enough internet. Like I got two hundred down by fifty up I mean how much faster can you possibly get and it was constantly an issue and so we finally went back to analog landlines and it cost me a lot of money to go back and forth and it was.

LAURA: It cost you a lot of patients too and potential new patients during that time.

T-BONE: Yes, I mean it's disgusting actually so I would say just on a side bar do not get suck with into fancy phone systems, your phone system is the lifeblood of your communication to your practice ok, you got to be able to answer call you got to be able to call people ok so.

LAURA: I'm going to add to that.

T-BONE: Go for it.

LAURA: Make sure your phones are being answered by people five days a week eight to five minimum because people when they

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call our offices they are expecting to talk to human and I know there's fancy

T-BONE: And they take the time to call because at this point that's a hot lead.

LAURA: Yes, I want to talk to them and I know there's a fancy systems out there push one if you want to talk to schedule.

T-BONE: No, no, I hate those things

LAURA: Exactly listen I called into an office recently because I'm calling different offices in the country and I got put on hold for four minutes by this employee and I listened to their recording they have a fancy recording and it played over and over and by the time they pick up I was like I don't really care that you have a CEREC. I don't care you do implant because I was so tired because people don't want to be on hold.

T-BONE: Who's got time to be on hold?

LAURA: Exactly so my big thing is your phone should be answered by a human by the third ring that's what I teach in Front Office Rocks because that's just good customer service when they get, when they call the office and it says if we miss your call we must be helping another patient all you're doing is you're telling that patient they are not important to you and you're setting up that's the little things that we're setting up this idea with the patients that we're too busy or we don't have time, we don't want that we want everyone to feel whether you're in that or not whether you have great insurance or don't we want every patient to feel like they are important to us because they can spend their money elsewhere they can go somewhere else and get dentistry done there is no question so we need to make sure everyone in our team understands everything we do is vital to making that practice grow.

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T-BONE: Ok so let's say so then I would say that one of the first question I would ask myself is are we answering the phone five days a week from eight to five ok, if the answer is no to that I even need more manpower ok or we need team people that need to understand the priority of answering the phone.

LAURA: So that's where you said where to start. I started Front Office Rocks because that is my number one thing is phone. Not only should they be answered, they should be answered with a smile, they should be answered by the third ring and that person should feel that that call to you is important.

T-BONE: Where did you train on these because this is like logical.

LAURA: Have you sit on front desk before?

T-BONE: No, I tried to avoid that place.

LAURA: Okay, go back literally the front desk and all you're sitting there it's quiet you make that call at insurance company you finally get through with human on the other end of the phone with the insurance company and all at the same time the doctor walks in, the hygienist wants to check the patients up and then that other line rings now you got six people looking at you, you're on the phone insurance and you answer the phone doctor's office please hold right and that's the thing we get so busy that we forget that phone is our lifeline. So what I teach with Front Office Rocks every time you answer the phone you take a deep breath and you smile because people can feel that right?

T-BONE: That's what I teach my son before he hit the golf ball take a breath.

LAURA: Exactly, and what it does you can tell I talk fast what it does for me is slows me down and it lets that person know whether they are new patient or current patient that that call is important to me.

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T-BONE: Okay, so we've talk about phone now what else is there that I need to evaluate my front office on?

LAURA: Well, so what I would say the reason I have Front Office Rocks I haven't set up by position so I would say whatever your pain is at the moment that's where your focus, so let's say your schedule is not as productive as you want, great so let's do some training on scheduling. We do productive scheduling, how to put together productive schedule, how to offer appointments to patients.

T-BONE: How do you define productive scheduling?

LAURA: Well, it depends on you should be hitting your daily goal every single day you know how some days it's like it's a ten thousand dollar day and the next day a thousand dollar, the next day is eight. A productive schedule should be hitting your goal whatever your office goal is on a regular basis.

T-BONE: Like 80% of the time.

LAURA: Yes, I mean there's going to be we know what the schedule right schedule is going to fall out of but you should have systems in place to go ok this patient just cancelled what are we going to do to fill that hole? And your team should know how to do that and there's a certain way do it, where are you going to go first, I'm going to go someone later today move him up, I'm going to go call tomorrow's patient to move him up, I'm going to call but a lot of these isn't trained, like you come up and say fill my schedule and the front office team is going...

T-BONE: Well they literally fill the schedule which is horrible.

LAURA: Right, which doesn't make it productive or you run around this is where I think the issue between front office teams and back office starts with schedule because if we put in somebody and now the assistants are in the back going I can't believe they put

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somebody else on the schedule and the hygienist where like when is the doctor going to come to my exam because the schedule right so we need to know how to schedule effectively and I don't think dentists know that and there's no training for that and we put someone in the front desk and they're doing the best they can which is where the love the training needs to be put in to that front desk so maybe you're scheduling, maybe she wasn't scheduling, maybe you want a stronger hygiene department ok so then do some videos on the importance of hygiene, pre-booking your patients talking to patients about Perio, talking about case acceptance like whatever you're looking at that you need help that's where you should start. Maybe you have brand new employee train him through all your videos in answering phones do not let your brand new employee answer your phones until they're trained because brand new employee has no idea how to handle those calls and you just spend money marketing to patients to call and now you put brand new employee to try them out you just waste all your marketing money because this brand new employee doesn't know how to answer these calls. So it kind of just depends on what your pain point is, is really where you need to start.

T-BONE: Okay, so now I'm in my head trying to figure out all these little things and so we've got phone skills ok, we have scheduling skills ok and then you talk about recall skills right hygiene skills correct, now I want to say ok great let's just pretend you know what I'm doing all that my team is there now you know what I want more for my front office team, I want them to be better in tuned to my business ok so now I want them to know my numbers a little better, I want them to be my morning [unclear] when I say I want to know where we are for the month, were we up or were we down, when is my next hygiene opening, when is my next rock opening so those are the things I want them to report so how do you –are you training on more effective morning huddles?

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LAURA: Yes, I have two videos on huddles, I have how to check your goals on a daily basis, what information you should be sharing with the team because a lot of I walk into the office and I ask the hygienist how are you guys doing against your goals they have no idea.

T-BONE: They have no idea and I suffer from that in my practice.

LAURA: They should so you know your team, if you guys are all playing the same game but they don't know what, how they are doing they got to know the score right so everyday your team should know how you're doing against our goals how many new patients have we seen how much have we collected, how much have we produce so I have and so the videos are set up according to positions.

T-BONE: Are you like consulting in a box?

LAURA: I'm consulting online in a box, yes.

T-BONE: Yes, but ultimately

Laura; Yes, and the idea is so that I don't come in the office and one of the thing that I think is that when you bring consultant in I think consultants are amazing but for the staff they feel that some are over their shoulder they're going to tell me I'm doing my job wrong and I know how to do my job I've been doing this for fifteen years don't tell me how to do my job, with my videos they're not intrusive so they can sit down and watch the videos on that sit over their shoulder

T-BONE: They can do it at home, they can do it in the bathroom, they can do it in the office, they can do it in the car, they can do it in the plane.

LAURA: Exactly and I'm not telling them that they're wrong I'm saying hey here's some other things that you could consider; have you considered offering appointments a certain way or have you

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considered asking for payment like if you have an issue with an employee let's say that's just not good in getting the patient's to pay – put them on some videos of what's the importance of why the patient should pay and how you offered you know you talk about it because not everybody is good at all the things we do at the front desk.

T-BONE: Okay, so do you have like I'm asking again keep asking selfish question.

LAURA: You'll be a client at the end of this right?

T-BONE: Yes, of course but ultimately I want to say is right so I want on board a non-experience dental person off the street person can I just say alright go to the website and follow, follow along.

LAURA: That was my original target with Front Office Rocks because I feel that dentists feel they have to hire somebody with dental experience on the front desk.

T-BONE: I think sometimes it's a bad idea they come with pre conceived bad habits.

LAURA: And you're also over paying because you're paying for the two years of dental experience or four years of legal soft experience and so they come at a higher price and I'm not saying people with dental experience aren't always great but I can go and get a great hostess who has given me great service.

T-BONE: Waitress they can juggle eighteen things at once.

LAURA: And they don't want to work nights and weekends anymore, at a dental office they can work eight to five, eight to six whatever hours

T-BONE: Four days a week, five days a week no weekends.

LAURA: Exactly and so you can teach them, I didn't know dental I remember first thing as a dental code thinking I needed to know

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all of them. I didn't know CiCAD services, I didn't know they have numbers I still can't read an X-ray right but I know customer service and every one of my employees at the front desk never had dental experience. We taught them that but they know how to multi-task, they know how they're good decision makers, they're great with customer service. I didn't have to teach that to them I just have to teach them EagleSoft, I have to teach them teeth you know I have to teach them dental codes and we can do that but we never had a resource before that like when I got into I had to go to, you know Maryland dental meeting and I had to watch Linda Myers teach me how to answer the phone I had to read dental economics and the articles you know there was no resource.

T-BONE: [Crosstalk] to me doing that sometimes because sometimes you send people to meetings and they learn things that you don't want to do.

LAURA: Exactly

T-BONE: And so here's my saying ok, my saying is we're practicing dentistry in 2016 using business principles from 1980's right and too many of our speakers are living in the 1980's still and they're teaching that.

LAURA: That's why I respect you because you're doing what you're doing and I've seen you speak at CEREC but you're still in the dental office.

T-BONE: I have to be.

LAURA: Yes, right this isn't making up for you.

T-BONE: Yes, this free podcast isn't making it for me.

LAURA: Yes, but that's the thing I'm still in the dental office so I know for example I just put out the thing about this flossing but the next

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day people coming in and going oh so I don't have to floss anymore and I'm like oh my gosh so I had to watch.

T-BONE: I have to ask my hygienist if we've heard that. I haven't heard any from anybody I don't think our patients read.

LAURA: Yes, there you go right exactly well, my husband is like if you're not going to floss you're going to keep us in business.

T-BONE: I told them don't floss it's up to you just floss if you want to keep.

LAURA: But because you saw me in the office and I'm still in the office I think that's important because there are a lot of people out there speak who are speaking but they haven't they're not in everyday anymore, they're not sitting at the front desk going how am I going to teach this to my clients, the people who are following me because I just had this happened to me ok great let's make a video about it so I can help other offices know how to do it better.

T-BONE: Ok so, alright so now we talk about a phone skills, scheduling skills, hygiene skills, recall skills, morning huddles business skills let's do one more so what is another skill.

LAURA: Case acceptance

T-BONE: Case acceptance so what role this front office play in case acceptance?

LAURA: Yes, huge, because honestly the doctor

T-BONE: Do you guys have a dedicated person case acceptance in your practice?

LAURA: No, we call them closers when they go and do that we have four people trained on it.

T-BONE: Ok so we have training coordinators I like the closer too.

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LAURA: Yes, I need the closer, we're huge because if the doctor comes in typically in a lot of dental office the doctor comes in and tells the patient what they need and the patient goes, yes, I want to do that, that sounds great and then they leave.

T-BONE: Oh, that's because they don't know how much it cost what it's going to take, they don't know anything yet.

LAURA: So now we give them this treatment plan and now we're going over would you rather buy anything without knowing the price?

T-BONE: No, not at all.

LAURA: So now they're not actually sold until they see the price and that's when what happens right now is we show them their insurance going to cover, always assumes insurance covers it all which it doesn't, then we show them their out of pocket amount and they either have to think about it or they pick up of the less they go oh well the crown is covered so I'll do the crown.

T-BONE: That's why I don't show them the list

LAURA: Right, but what do you do, how do you do?

T-BONE: We have a financial worksheet that we just right at the top what we're doing on them and then so they don't have individual prices and then we just give them the entire treatment plan, in our worksheet you just place in excel pdf, you plug in the numbers say \$2000 and they populate all the fields of how they can pay based on the dollar amount so..

LAURA: Okay, yes that's great and that's the kind of thing there's a lot of people who've never been trained in selling.

T-BONE: So I should do a video for you guys.

LAURA: Yes, yes, exactly I would love that.

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T-BONE: So because ultimately I think these treatment plans are horrible ideas to give to patients and I think ninety percent of the patients don't care.

LAURA: Well do you know what the thing is that patients the only reality, the only thing they know is their pocket book- money and their insurance book right and as long as those are all that they know we're letting them choose, they're going to choose what's the insurance covers and what's the cheapest.

T-BONE: And I think ultimately and my team sometimes argues with me, other dentist argues with me I don't want, I want almost all my patients to choose payment plans whether that's third party or we do office payment plan on our practice because what I find is those patients accepts bigger treatment or they accept complete treatment. They don't say ok I want to do this filling on this side, this filling on this side and then I'll come back to do the crown which I'm like all the crowns next filling want to numb the area I just want to knock them all out so now I don't give my patient that choice in the sense.

LAURA: We're actually just going through that in our office and I just did a couple of videos about this. I filmed at night after work when I get ideas right so we are certain to bring special sense, our treatment plans are getting larger and my team has been doing you know this is what it costs, here's our payment options how do you want to take care of it? Well some people are like I can't do that right so now we have to change our discussions because we want them to accept the full \$10,000 treatment plan and they're not just going to come up with the credit card and go I have ten thousand dollars. I wouldn't do that, right? So we need to change the way we're talking to patients because our treatment plans are getting larger and we need them to accept the entire treatment plan we can't just do at peace be we have to if you're going to see the periodontist or the

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endodontist and the root canal and the crown we need to close the entire treatment plan.

T-BONE: Yes, absolutely!

LAURA: Yes, and one of the things I mean I've known you for years my husband is a CEREC doctor we love CEREC but the issue I feel that the CEREC sits in the back in some offices and isn't being use it's not because the technology isn't amazing it's because your front office systems aren't in place to get the patients to show up and get the crowns and [unclear] done and so that's my mission to make sure we're doing everything we can in the front to get the patients in the chair so that you can be using the great technology that's out there.

T-BONE: Alright, I'm going to put you on the spot.

LAURA: Alright, I'm ready.

T-BONE: I don't think you're ready you might not so I want you to walk me through because I struggle with this as a business owner, as a dentist leader. Walk me through a day in a life on a front office rock star what it is what is it that my team, my front office team member should be doing on a day to day basis, I don't need the one offs okay, I'm talking about on a day to day basis this is what I need to make sure I get accomplished today.

LAURA: I don't think we have enough time for that.

T-BONE: Okay, so yes so let's start right?

LAURA: Well so I think that the difference between well let's just do this we spend too much time on insurance, we spend too much focus on insurance, we spend too many hours on the phone with insurance.

T-BONE: I think those should be compartmentalized I think you should schedule out a half day once a week or...

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LAURA: That's not possible.

T-BONE: Why?

LAURA: Because there's patients call in do you accept my insurance, how much is going to be covered or you have a treatment plan for somebody .

T-BONE: How about a follow up for with insurance calls and things like that?

LAURA: Oh yes, there's definitely a schedule that you should have, so you go Thursday afternoon are great time to do that's a little bit [unclear] whatever but the biggest thing for me is that we need to remember our patients are first so your front office team to be rock stars they need to come in understanding that that patient no matter what their insurance is, no matter what their that patient is priority always and we get so...

T-BONE: So live human being in front of you.

LAURA: Exactly!

T-BONE: More important than the phone more important than anything else.

LAURA: The human being in front of you, on that phone more important than the insurance one of my biggest pet peeves is that we say our patients are insurance driven like our patients.

T-BONE: We're insurance driven

LAURA: What's the number two or three questions that you ask on the phone, "hi, what's your insurance and doctors are just as guilty because doctors are "Oh there are new patients they're great what's their insurance? Does that matter?"

T-BONE: Or sometimes you know I'm guilty of this are we talking to patients about treatment I can see in their eyes like oh my God

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it's overwhelming and I say you have dental benefit right and then I see their face they're like oh no, I don't I just screw that one up.

LAURA: Well and I think when you're looking in during the exams a lot of times that's playing in your head how much insurance do they have left? What is their insurance? That's the kind of thing so if doctors can get more confident and teams to like let's put insurance aside let's focus on the patients because if the patients feel that they're priority and that you're taking care of them and they're not just the number and your team does that from the first phone call, from when the patient walks on the door, from helping them get scheduled to helping them get their payment options figured out the patients going to accept more treatment they're going to do more in your office versus what's your insurance cover, you know.

T-BONE: I don't disagree, I don't disagree obviously so let's go back to my front office person, what is the day and the life of an office rock star look like?

LAURA: Well, so I would say that the attitude is first, when you walk in the door I don't care if you have drama at home, I don't care

T-BONE: If you have drama at home.

LAURA: If you have drama right, when you have drama so it always starts with the right attitude and then it's not just the front office team it's everybody with the right attitude including the doctor needs to rock in I mean we're in stage when we walk in to the office everything gets laugh at by the...

T-BONE: So usually this great room where we are on show.

LAURA: Yes, exactly then it goes to an efficient huddle I mean to be prepared for the huddle and to know what's going on with the patients.

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T-BONE: So what does the front office person need to bring to the huddle?

LAURA: They need to know of course details about the patient they need to know things about them like do they have a balance, to they have if they're referred to us or not, if they're new patients where they come from tell us a little about them, they need to get us out of the clinical because a lot of huddle is what are we doing today in this treatment.

T-BONE: I can read the schedule to figure that out it's easy.

LAURA: Exactly we need to talk about the patient since so the front office team needs to come prepared talk about hey this patient their spouse came to us so we need to ask them to refer their spouse or this patient did refer to us last week so we need to make sure we thank them or they just came back from vacation so to make that in a personal connection because you know the doctor they loved it if the staff goes here doctor you need to know this right or the rest of the team so the huddle is the next thing then from there I think.

T-BONE: Let me got back to the huddle real quick. I think there's one other thing that the front office needs to know- when is the good time for emergencies today?

LAURA: Oh yes well and that's the scheduling thing yes, I think that I also think it's important to talk about where we going to get punch out where we going to get potential issues because if we all know hey between two and three today it's going to be crazy so if anybody has an extra moment to jump in and help that would be great much better than waiting till three o'clock and you got people slamming instruments around sterilization because they're mad because it was so crazy. So looking ahead to be prepared and we've got an opening how we're going to fill it who has ideas right because maybe you have an hour in the afternoon and the doctor schedule, right? Well you

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got hygiene patients coming in maybe this patient had talk about waiting in the past we can get him to stay and do [whitening?] or yes.

T-BONE: You're ADD like me ok

LAURA: I know right exactly I have a video on this specifically.

T-BONE: I know, I know, I get. Okay, so know my front office starts with a great attitude. They bring it for the morning huddle. Then what do they do at eight o'clock?

LAURA: Well the first thing is getting the patients in, watching that schedule like a hock to make sure that your patients are arriving, they're being greeted they're supposed to, that you're timing your day so that you are doing the paper work, the insurance calls, the confirmation calls if you're not using like an appointment reminder or something around the times when you don't have a patient in front of you.

When the patient's there in the reception area, the focus should be on the patient not on the little tasks that we do. So always making sure that patient comes first.

T-BONE: Are they being seen on time? Is the clinical team ready? Keeping them up to date on where they're at in the process.

LAURA: Yes, and not ignoring them, like, the patient's sitting there and...

T-BONE: Like if they sit there for more than six minutes you better say, "Are you doing okay? Hey, let me go check to see what's going on."

LAURA: Because the thing is, people don't like to wait.

T-BONE: No, I hate waiting.

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LAURA: Right. And so, at least if you're talking to them, I would rather have my team, my front office rock stars talking to the patient about their kids, and their car, their last vacation, because it's going to make that wait time seem so much less because you're interacting with them.

Now, there are some patients who are like, "Leave me alone, I want to stay with my phone." And that's fine too, but...[crosstalk]

T-BONE: But you can figure that out by looking at them.

LAURA: Exactly.

T-BONE: Sometimes it's just eye contact.

LAURA: Exactly.

T-BONE: Sometimes it's about not avoiding them. So now I'm doing my day to day stuff, obviously I need to make some insurance phone calls, follow ups, eligibility checks, things like that, what else?

LAURA: I would say staying on the schedule – I mean, we do all our consultations in the consult room. So our front office team – we wear headsets in our office. Have you done that?

T-BONE: Yes, we have headsets.

LAURA: I love it Change my – as an office manager, so we [crosstalk]

T-BONE: I would say my problem with the headsets, I only have one "yeah-but" on the headsets. Nobody gets up the but anymore.

LAURA: Because of the headsets?

T-BONE: Yes.

LAURA: We don't have that issue.

T-BONE: So we have the chatter going on, right?

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LAURA: Yes, we have a very strict policy about our headsets. What can be said, what can't be said, what you do. So like...[crosstalk]

T-BONE: We do have conversations but it's like, can you help? And then we'll get up [unclear]

LAURA: Well, one of the things that – that's true, that's a good point and also when you go, "Hey, can you help me?" And there's dead air and nobody responds....

T-BONE: That means no.

LAURA: Right. So somebody has, "I got it. I'm on my way or I'm there." And then don't answer from the rest room. We had somebody who's like, "I'm in the restroom" We're like, we all didn't need to know that. So, for us, it's about the patient. So there's consult, the doctor says go in. He handles the patient. Help the consult. It's always putting the patient first.

T-BONE: Okay.

LAURA: Our days at the front desk are – I would love for you to come sit at the front desk. It is insane.

T-BONE: I know it is.

LAURA: And so I know when I go out and speak, I hear people speak and they talk about, here's what you need to do and like, we were just talking about this, we're here with a lot of great people this weekend at Revenue Well and they were talking about you should be rejecting treatment plans. I'm like... [crosstalk] We know we should be, but there's, you know, you finish the long patient and then you turn around the next patient standing in front of you. So it's whatever it is and I do teach systems and processes but always making the sure the patient's first.

T-BONE: You know what would be better?

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LAURA: What?

T-BONE: If the software is smart enough that have six months and auto rejected everything.

LAURA: Wow very good idea.

T-BONE: You know, because – so a treatment plan should only be good for so much time. I don't want to delete it but it should auto reject it, because – okay, so I want to come back to that.

So my people doing insurance, how are they – are your team members doing confirmation calls?

LAURA: My philosophy on confirmation calls is the purpose behind confirmation calls is to get the patient to show up, right?

T-BONE: Right.

LAURA: So some people, like my mom for example, she puts in her calendar from six months from now. You don't have to call her. She's going to be there. Like she's one of those patients. But then there's patients where you have to email them, call them, text them, call them 20 minutes before their appointment and say get in the car, you need to get here [crosstalk]

T-BONE: Laura, I don't want to use email and text. That's so impersonal.

LAURA: Well, you personalize it for the patient. So, if you call my voicemail, my voicemail says, "Do not leave me a message, I will not check it. Text me."

T-BONE: I'd like to turn mine off.

LAURA: Right. Don't leave me a message. I'm not going to listen to it and I'm not going to call you back. And we all know there are patients who just wanted text, they don't want a phone call.

So some patients need calls, some patients need text. So my philosophy around confirmation calls is, you have to do

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whatever you need to do to get that patient to arrive, because your purpose in a confirmation call isn't the call. Your purpose in doing a confirmation is getting the person to show up.

T-BONE: Right.

LAURA: So some are emails. Some are texts. Some are all four, text, email, call, and I don't know the fourth would be. Go pick them up. Right?

T-BONE: Okay.

LAURA: But we have to understand and that's one of the things I teach so much. If the staff doesn't understand why they're doing what they're doing, then they're just doing tasks. But if they understand why it's important to...[crosstalk]

T-BONE: So it's not the how, it's the why.

LAURA: It's the why, right? And the doctor, the way you start it with the doctor's give the love to the front office team, the doctors, typically are not great communicators and the doctor has a goal and we all do tasks. But if we don't fully understand what the goal is and the purpose behind what we're doing, it's just tasks, making overdue re-care calls. That's like one of the worst things you have to do because you just get voice mail after voice mail.

T-BONE: So your team does that throughout the day too?

LAURA: Yes.

T-BONE: Do you have a quota? I hate to use the word quota.

LAURA: Well, what we do is we print and everybody that's overdue and they got a call once a month, they get an email from our office and they get a text from us once a month. So three times a month, they get some touch from us trying to get them to come back in.

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T-BONE: At what point do you quit?

LAURA: I don't.

T-BONE: 18 months? 24 months?

LAURA: My husband and I have had this battle back and forth, I don't. And here's why, nobody focuses on this part of the mouth part of their body except for us, right? We're the last place anybody wants to go and so when people...[crosstalk]

T-BONE: I don't think my rectologist would be the last person I want to go.

LAURA: That is a good point, right? One office or another, right? But the issue is, we think when patients don't come back for two years that they must be going somewhere else. They're not going. They're just not going.

T-BONE: They just disappeared.

LAURA: Exactly. So my husband and I had this battle back and forth where he's like, "I think we should stop after two years or whatever." And I ended up winning this one. I don't win a lot but I won this one because we had a patient, a new patient that came in and we asked him how, how did you find out about us? And he said, "Oh, my co-worker said you guys are great dentists. You're his dentists and he referred you to me to come here." We looked up the co-worker...

T-BONE: And you haven't seen him in like years.

LAURA: Five years. He hasn't been in five years, but he's talking about us like we're his – so if I wasn't reaching out to this guy regularly, he's getting postcards from other dental offices. He's getting other things coming to him.

T-BONE: You're not showing them the love they think you don't care about them. You don't matter anymore.

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LAURA: Exactly.

T-BONE: So, okay, is there anything else – I want to transition to two things now, if I can remember them. Are there anything else your front office team is doing throughout the day? So they're bringing it from morning huddle. They're taking care of the patients, answering the phones, they're doing recall calls, they're doing some insurance follow ups, they're doing treatment calls, so what else are they doing? Anything else?

LAURA: Awesome notes. Notes, notes, notes.

T-BONE: So every time they have a touch with the patient, by phone, or human being...

LAURA: Yes, and any conversations that they had, when we do consults we talk about everything that we talked about in the consultation because you may not be the next person with that patient and we deal with hundreds of patients, we're not going to remember this conversation. I won't remember it at the end of the hour, let alone the end of the day.

So putting in great notes every single time you do anything with the patient because that's how you're going to give the patient great customer service by remembering them.

T-BONE: Okay.

LAURA: One other thing I want to say and I don't know if you've done this or if you've thought about it, I just recently, I guess it's been since January, so six-seven months, outsourced our insurance. So we now use another company that enters all of our insurance checks for us, does all of the write ups the way we're supposed to and does the outstanding insurance claims follow ups for us.

T-BONE: Who are you using?

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LAURA: It's a company called E-Assist and they literally [unclear] so that the checks come in. I used to have somebody do this all day long, right? Checks come in. We scan them and it goes into a file. They now remotely login and enter all the checks for us, balance it, so I think it's a good checks and balance for embezzlement issues, fraud, right? They give us at the end of the day, they send to the doctor, here's all of the claims I got entered, here's what your balance is and we balanced it against the checks we have in the office and then they call on all of our outstanding insurance.

T-BONE: And what do they take from you?

LAURA: They take a percentage. I can't tell you on top of my head what it is but it's a percentage, but it's a percentage of what they collect. So the reason I like that is because my employee who was doing this job before, she's spending six-seven-eight hours doing this, whether we get paid or not, she still gets paid. Whether that claim gets paid or denied, she still got paid, right?

Well, this company is motivated to make sure that you get paid, you get paid quickly and you get paid what you should get paid by insurance company because that's how they get paid. So what it did is it gave me one of my employees back to do things that I need them to do. Outstanding treatment calls, consults, customer service, because they were focused on insurance all day long and really, somebody else can do that for you. So that's something you may want to consider. It was a huge change for me because it was very frustrating to have somebody sitting over here just doing insurance all day long when I needed them to be out there with my patients or on the phones with my patients and doing the other stuff that people you can't outsource.

T-BONE: I don't disagree with you there, but as I'm thinking about this...

LAURA: I can tell you're a bit [unclear]

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T-BONE: But I believe in vertical integration. And by that I mean I like touching and feeling and seeing people, so I think you should have champions in your practice.

LAURA: Okay.

T-BONE: So I would say that at the end of the day, you should have an insurance person as a champion but she get paid based on what – she get paid the same way. So there – everybody should have a base salary of something, right? But then their number really comes from how well that department does and his or her case it would be all about the insurance checks.

LAURA: I would rather and I'm going to challenge you on that one.

T-BONE: Because now I can do eligibility check on demand.

LAURA: Yes, well, and we still do our eligibility checks. [crosstalk]

T-BONE: So you're not getting [unclear]. I would literally have...

LAURA: I would love to find somebody who can do that for us because there are certain questions I want answered when I call and do eligibility.

T-BONE: I want it when the patient's in the chair.

LAURA: Yes.

T-BONE: Like my patient's interest in the guard, let's get the answer, what is your dental insurance coverage? What is your medical insurance coverage?

LAURA: And there's ways out there to get some of it but not everything that you need. And I wish we could figure that out. So that part I haven't figured out, but on the backend, you're going to get paid what you're going to get paid by the insurance company. They'll pay a certain amount, this is their code, this is what they pay. So from – there's not a lot of incentive for me to incentivize an

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employee to try to get us paid quickly and what we're supposed to come from the insurance company. What I'd rather incentivize the employee on is have we hit our production and collections goal because we had great case acceptance this month. And that's something you can't outsource case acceptance. You can't outsource consults. You can't outsource [crosstalk].

T-BONE: I would disagree; you could outsource case acceptance. You can do it electronic medium.

LAURA: Yes, I mean you can use, but you still – the patient needs to have that one on one interaction and your team's the best to do it.

T-BONE: Of course.

LAURA: That's what I want my team doing everything that I feel that they need to be doing and I can't get it to somebody else to do. Insurance, that can be handled by somebody else. I mean, I called Delta the other day and the recording came on and said, you're going to be on hold for 42 minute.

T-BONE: But at least they were honest with you. I wish the airlines would be honest with me.

LAURA: I'm thinking, Exactly, right? But think about what my staff could do in that 42 minutes. Now, I train...

T-BONE: They get off the headset.

LAURA: I train on what you could be doing but that's 42 minutes, that somebody's sitting there, holding up the phone line.

T-BONE: But you know what, you know, it's interesting, I have a dedicated medical biller in our facility and I asked her one day, "why do you come in at so early in the morning?" She goes, "because I can call the insurance companies and I will get them

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immediately. Because if I wait until nine o'clock to work, I'm waiting along with the other thousand practices that are calling.

LAURA: But this is why I'm saying we're playing the insurance game and we need to change our focus and make sure that we're playing the customer service game. That's really – I mean she's winning at it. I know everybody, you push, you got to call that line and push five, I think you get a human. If you call another one [crosstalk]

T-BONE: They change it, right?

LAURA: Yes, exactly. But we're playing this insurance game and we're always going to be playing it. That's just the nature of the beast, but we need to understand why we're in the business we're in. It's not insurance, it's people. And yes, it's teeth, but if the people don't show up for the appointments we're not going to be working on a lot of teeth. So my focus is making sure that my team's always focused on the patient.

T-BONE: Alright, so...

LAURA: You have like, three things you're going to remember, have you remembered them?

T-BONE: Yes, I'll come back to that. So here's my message to everybody, we need to show our front office team the same love that we show our hygienist, that we show our assistants, that we show our treatment coordinators, that we show ourselves clinically because our front office team at the end of the day, can make or break your practice. They're a part of it. They certainly – they can break your practice.

LAURA: Yes.

T-BONE: I don't think they can certainly make your practice totally. I think they can break your practice and so [crosstalk]

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LAURA: I'm going to disagree. I think they can help make your practice too, right?

T-BONE: But I think it's easier for them to break it.

LAURA: Sure.

T-BONE: So how about this...

LAURA: Well, your focus comes when they start to break it. That's when you pay attention.

T-BONE: So how about this, I can overcome some mistakes my front office makes by my relationship with patients, but I can't overcome my front office team not being part of the team and not getting things done. So, how do people get in touch with you and how does your service work?

LAURA: So it's subscription based website. Right now there's over 183. I add new videos, anytime an idea comes up or somebody ask a question, it's \$149 a month and you sign up for the office and you can train as many people as you want, anything you want.

T-BONE: Is there a contract?

LAURA: No contract. Month to month.

T-BONE: So if I like – if I want to get one person train on phone answering and then I want to cancel, then I wanted to come back in.

LAURA: Yes, I have some offices have been with me for years and they do the training, [unclear] around a huddle. The whole team watches it. Some use it to train new employees and then they cancel and the next time, because there's a lot of turnover, they sign back up and then they do the training. So you can use it. The idea was to make it easy to use. It's online.

T-BONE: On demand.

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LAURA: On demand. When you need it there's a search function so if you're looking for – I need help with hygiene. You search hygiene and everything having to do with hygiene – documents, videos, articles I've written are there so you can pull out of it what you need to help you in your office. You don't have to send your team to a seminar. You don't have to bring a consultant in to help fix whatever is the issue. You can use the training right there in your office when you need it.

T-BONE: What's the website address?

LAURA: It's frontofficerocks.com

T-BONE: R-O-C-K-S

LAURA: R-O-C-K-S

T-BONE: frontofficerocks.com

LAURA: Yes.

T-BONE: Alright, so now I want to go into a different direction.

LAURA: Okay.

T-BONE: Okay, so we here at Revenue Well, so I think we should show them a little bit of love.

LAURA: Right. Exactly.

T-BONE: I know that we both been using Revenue Well, honestly, from the early days of them. So, talk to me about how are you using Revenue Well and how are they different?

LAURA: I used 100% of Revenue Well which I talked about the importance of that when I'm talking about things we do on Front Office Rocks. So I was with another company for years and I was in a contract, which is one of the things – again, Revenue Well doesn't have a contract and that was a huge thing for me because they've got to earn your business every month. You

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better be happy with it. But I wanted to switch to Revenue Well but I had to get out of this contract and I was worried that my reviews are going to be lost online because we had over a thousand reviews from the other company that we are working with. But we got – I didn't know this, you can pull your reviews from – they are your reviews, pull them down and then put them back up when you switch over Revenue Well.

So for me that was the, okay great, I'm not [unclear] to do it.

I love revenue well because the one thing we don't have at the front desk is time. There's not enough time to get everything done. So Revenue Well has done, not just appointment reminders, but they also do birthday emails and you can do a newsletter like this and send out a newsletter to your patients. You can do so many different things that a lot of these services offer. But the number one thing Revenue Well has is they can read dental codes. So for me that's huge because it sends [unclear] emails out to my patients after treatment. It has follow up treatment plan emails. So we're reaching our patients not just phone calls from my team. And if my team don't get – doesn't have time to get to the phone calls, at least they're getting an email from my office.

T-BONE: Your patients are they answering the phones, by the way, during the day?

LAURA: Oh my gosh, no. And I was – we were just talking about this. I get more communication from patients now in the evening than ever before.

T-BONE: Yes, like I read my email at night or first thing in the morning and then I do my best responding to emails at night or first thing in the morning.

LAURA: Exactly. Because whether our patients up between eight and five, they're working.

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T-BONE: Hopefully they're working so they can pay my bills.

LAURA: Exactly. Yes, exactly, right? So it helps me communicate to those patients who are not getting [unclear]

T-BONE: So you touched on this treatment plan follow up, isn't that unique?

LAURA: That is, yes. So Revenue Well was designed by a dental office manager for dental offices. So Revenue Well is focused on our industry and that's the key thing with what they do because they're always looking to help us do better in our offices. And one other thing is reading dental codes. I don't think any other company does this at this point and what it does then is it can pull out of your software. This patient has treatment, you can do as much as send emails to say what the treatment is or you can say, "hey we know of your outstanding treatment. We care about your dental health. Call us. We need to get you scheduled." But because it can read codes, it's another resource to reach out to patients to try to get them to come to get the appointments. It helps [unclear]

T-BONE: Well, it also segments out your list.

LAURA: Yes.

T-BONE: So if you want to do a CEREC promotion, there's no reason to send to somebody that only needs prophylaxis but you need to send it to who've been diagnosed with crowns or fillings even.

LAURA: We, we're doing an Invisalign day coming up in September and we just did a newsletter. Everybody that we've talked to about any sort of ortho to get them to try and come on Invisalign day. We're hiring an orthodontist, so now anybody that have treatment plan for root canal – so you can use it to help and it's fast. Super easy. Somebody at your – how long would it take me to call 50 patients?

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T-BONE: Impossible.

LAURA: Right. Versus sending one email to 50 patients.

T-BONE: And your team doesn't want to do it because they have this, "Oh, I kept bothering them. I'm being a sales person." So I'm like, okay, great subliminally.

I look at Revenue Well from a couple of perspectives. One, I look at it as it's keeping me top of mind with my patient's automated. So even if my patient doesn't respond, they at least see my name, hopefully it brings good memories to them, not bad memories. But they see my name and the other thing is, it's subliminal marketing. So for example, that patient, one of the things we do is like – so with Revenue Well, you can do drip campaigns, autoresponders, essentially. And if somebody needs a crown, you can send them an educational piece about crown. What is a crown? How does a crown work? Then you can send them another educational piece, what happens if you don't treat the tooth or the crown early enough? It may turn into a root canal. And then you can say in the close, which is – "hey, listen, we've shown you this, this, and this, it's probably time for you to get scheduled for that crown.

LAURA: Right.

T-BONE: And so you can customized it to what works in your practice.

LAURA: What you want to say. Yes, that's what I like. My husband went in and kind of wrote what he wanted to go out a message to the patients. So it sounds like it is from us.

T-BONE: And then you can attach YouTube videos. And I think in my practice I'm guilty of this as well, none of us take time to produce videos, personalized videos about our practice in our own voice, and our own face so the patient sees that.

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LAURA: We did and I think you haven't seen it. But you can look at – we did a happy birthday video. It took us 10 minutes. I got my whole team together, we wrapped some gifts, we had some balloons and we did a quick happy birthday from our smiles to yours. And it goes out on our birthday emails.

We get so many comments from our patients about that and my point for customer service and front office is, for healthy patients, we see them twice a year, right? Two hours a year, in between those six months, they're not thinking about us.

T-BONE: No.

LAURA: They're not going, "I wonder what's going over at [crosstalk]"

T-BONE: Or we want them think of us so they can refer other patients.

LAURA: Exactly. So every time you get a chance to, and it's not just always about dental, so they get a birthday email and it's a video and it's cute and they're like, "Oh, look at this" and they're at work and they show it to their co-workers. Look at what my dentist sent. And then the co-worker's like, "They look cool. Where do you go? I haven't been to the dentist a long time." So, the idea is to be in front of mind like you said, because those six months in between are a long time and those patients are getting a lot of communication from other dentists in the area and we want them to remember why they like us, why they come to us. And that's where it can [crosstalk]

T-BONE: And you want them to know what else you do.

LAURA: Exactly.

T-BONE: Like when we started doing sleep apnea therapy at our practice, we started sending out Revenue Well campaigns on that. So it's great. Now, Revenue Well is a fantastic program. I think it was shocking to me to hear that market penetration for patient communication products in general is not even 50%.

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LAURA: I was shocked by that too. I was shocked by that too. And for me it's kind of a no brainer, right?

T-BONE: Yes.

LAURA: But I think there's a lot of people who are – I think they're afraid of technology. They want that personalized type. My girls call from the front and they call to confirm, or whatever. Well, first of all they're not calling every patients to wish them happy birthday, right? And they're not reaching list of patients. I mean, for those of us on the front, we know, when you're calling you're getting voicemail, right?

T-BONE: Yes.

LAURA: So some people you have to reach them via text. So you have to reach them via email. So if you want patients to show up, you need to adapt your communication to match the patient not to match necessarily what we've always done.

T-BONE: We use Revenue Well for social media so once a week we schedule a post, we can push our reviews to Facebook, to push our reviews to Twitter. We can use their – they have this pre made campaigns that you can like an educational piece that you can send out.

I don't have the time to create a campaign on CEREC to put on Facebook. So why not just use something that's created for me because something is better than nothing. Obviously, having it customized for me would be best but something is certainly better than nothing.

LAURA: One of the things that we heard today, for those who haven't considered an appointment reminder service or something like this [crosstalk]

T-BONE: Revenue Well is so much more than that.

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LAURA: Right. But to make that first, what I recommend is if you don't have anything, open your mind to having something. Then I recommend Revenue Well and I can tell you all the reasons why. The reason why I changed over to Revenue Well, but it's kind of like what we were talking about earlier that nobody has appointment books anymore. I mean, remember the big books that we used to have at the front desk?

T-BONE: I never [unclear] that.

LAURA: Nobody has it anymore, right? So it's time to evolve. [crosstalk]

T-BONE: Well, Index cards, you should keep track of the accounting.

LAURA: Exactly. We have to evolve. Now, charts in the office, I'm paperless in my office. We don't have charts and I know there's a ton of charts still here.

T-BONE: We buy so much paper every month for being paperless office.

LAURA: Yes, I know, right? We're not really paperless, but it sounds good. So it's the same. It's going in that direction and your patients need – when we say personalized, it needs to be personalized for that patient. And look at us, I mean, somebody was talking about, right now I can tell you what my battery level is on my phone because we're connected to these phones. They're on our hip. We know where they are. We know [crosstalk]

T-BONE: You sleep with them.

LAURA: Yes, exactly, right? Thank goodness, we lost power this morning, it woke me up, right?

T-BONE: Yes.

LAURA: So we need to understand what our patient's need is – this is where we need to be customer focused. We need to understand what our patient's want.

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T-BONE: I call it being patient-centric.

LAURA: Yes. Completely.

T-BONE: Patient-centric is doing what the patient wants in a manner that makes sense with them, given them the opportunity to communicate with you and I wrote a blog post recently called, being open 24/7, allowing your patients to request appointments. Allowing them to make payments online, to check their account online, to do all those things. And technology for a simple cost of \$299 a month, \$300 a month to have access to something like that is unbelievable.

LAURA: I think a lot of the issues are people don't like change and implementation. A lot of like – implementing the CEREC was big ordeal on our office, right? There's a lot to implement.

T-BONE: And everybody's office.

LAURA: Right. Implementation of Revenue Well is like, we turned it on and it was working.

T-BONE: And nothing else, at a minimum, it just out of the box it does your appointment confirmations, it does [crosstalk] recalls, at least out of the box it does that.

LAURA: And it gives your team time because they now have – they don't have to call every patient. You know, somebody can say I'm confirmed, I'm coming. Now your team doesn't have to call them. Now it's up to your office and the patient on how they want to do it, but in my office, if we know that patient is going to show up and they've confirmed [crosstalk]

T-BONE: It's last on my list to call.

LAURA: Right. True, exactly.

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T-BONE: I make calls just to say hello or something like that but it's last on my list. The first one is the one that haven't responded to everything else.

LAURA: Exactly, exactly. Yes.

T-BONE: Anything else? Any questions you got for me?

LAURA: I don't think so. You're going to CEREC World, I'm excited about that.

T-BONE: Yes, I'm going to be there an entire week. Listen, I'm excited about it. I'm super excited. By the time this comes out, it will be done but I'm super excited.

LAURA: Hopefully it will be great.

T-BONE: I'm not excited about being there that long. The good news is my wife and kids are coming down on Thursday, I believe. So at least I'll get to see them at night time. I won't see them during the day, but that's considered a vacation for me.

LAURA: Well, so I am excited about they're actually doing more than just CEREC for once. It's been...

T-BONE: Yes, so CEREC World is not CEREC World. It's essentially like a great dental meeting and if you really think about it, I think it has a chance to take people away from going to the ADA the Chicago Midway and things like that, because the education is that good.

LAURA: Yes, and the speakers are amazing. So I'm looking forward to it and hopefully it's great and we go to more of them. But yes, I think going to Florida in the middle of August is [laughs].

T-BONE: Yes, but at least it'll keep me inside. [crosstalk] Just like you live in San Diego with 68 degrees year round. I live where it's 70 degrees year round. It's called inside.

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LAURA: Yes, exactly, right? Well, and I know when we're in Vegas at CEREC 30, CEREC 27, we never went outside.

T-BONE: I don't see daylight.

LAURA: Yes, you were inside the whole times.

T-BONE: Well, Laura, thank you so much.

LAURA: I appreciate this.

T-BONE: And hopefully our paths will continue to cross and we'll do some more talks.

LAURA: And I hope all your doctors listening show some love to their front office.

T-BONE: Yes, I want them too.

LAURA: Yes, that's awesome!

T-BONE: Take care.

LAURA: Thank you.

Thanks so much for listening to *T-Bone Speaks* with Dr. Tarun Agarwal. Remember to keep striving for excellence and we'll catch you on the next episode.