

NO MORE PATIENT'S PAPERWORK!

5-23-23 *Hello*! Why not remove all points of patient friction that we possibly can? In our marketing world, we know that the more we make it EASY on the consumer...the more they will make it FANTASTIC for us!!! We have documented for decades that as your NEW, <u>INCREASINGLY FRAGILE</u> DENTAL PATIENT is asked to fill out ANY paperwork...no matter how concise...in office, at home, on an iPad...or whatever...IT <u>SUPER</u> DISTURBS THEM! Particularly older, wealthier, better-educated males. Most are quietly <u>insulted</u>!!!

Most U.S., Canadian & AUS/NZ & other western patients are CONFLICT ADVERSE! They won't come out & tell you how **EXTREMELY UPSET** they are!! You are asking them to WORK...before they know how great you are. Even when filling out insurance or health history forms in office, they are usually **deceptively quietly upset**. And when they are at home, asked about insurance-related matters...it causes them to question if your office is the place they are supposed to go. So next, they ask a coworker where THEY go! You immediately...& quietly...lost that patient...& all their referral. Please, remove this friction!

We Engaged Two Independent LAW FIRMS for Advice:

Obviously, we needed to call on **expert legal guidance** in this area. No one needs legal hassles...but no one wants thousands of quietly lost patients either. In short, we contacted firms in two different states & independently asked them to research how we can remove practice & patient damaging paperwork from the new patient inflow process.

Both said the same thing: If the doctor...while the patient is in the chair...reviews & discusses any possible medications or conditions that the patient might have that would interfere with any clinical procedure...or might put them at risk...& the doctor simply notes it in the chart at that time...it is the same as if the patient had filled out the form before coming in.

Generally, attorneys tell us that communication between the doctor \mathscr{E} patients in the chair...noted in the patient's chart...is equivalent to a written contract with the patient. Verbally discussing health history questions while in the chair is apparently no exception.

Face-to-face, two-way communications is ALWAYS better. Many suggest that patients filling out these tedious forms are so exhausted & **disgusted** that they RUSH PAST questions or write down inaccurate information anyway! **How is this clinically, legally or ethically safe**?

So What Questions to Ask & Topics to Discuss?

While a few practices have begun implementing this approach, most agree that displaying questions on a digital screen or piece of paper...while the doctor & patient discuss any health-related issues...adds an additional layer of security. Some have implemented a digital signature pad component that suggests that by signing, the patient & doctor fully discussed all health & medication issues. But no more paperwork. It is probably wise to note on the chart the time & date that the review took place...& the doctor with whom the discussion occurred.

While you may elect to ask more or fewer questions, here are some topics clients discuss:

Are you allergic to any medications? The medications that we frequently prescribe are penicillin, novocain, aspirin, ibuprofen, tylenol & codeine. Can you not take any of these? Are you taking any medications? Are there any pills that you take every day? (If patient is taking BIRTH CONTROL) Are you aware that antibiotics DECREASE the effectiveness of birth control? Has anyone ever told you that you have heart problems? Has anyone ever told you that you have a heart MURMUR? Has anyone ever told you that you have HIGH BLOOD PRESSURE? Have you ever been hospitalized for SURGERY? Do you have any hardware inside of you, such as pins, screws, artificial hips, knees, joints?

As for insurance-related forms or questions...most practices NEVER discuss matters that are even remotely related to insurance or money over the phone...EXCEPT to assure patients that "their insurance works great here"...but only if the patient asks! Any eligibility or coverage issues can be efficiently discussed while the patient is in office...verbally, gently & face to face!

Guess What Your Practice Liability Insurance Guys Will Say?

There is little that your friends in the dental insurance industry **dislike** more than allowing high billing, wealthier, working & better-insured patients into your office. These patients who are allowed in...without friction...**file larger claims** & **greatly deplete their profits**!!

As you may understand from the **McCarran-Ferguson act of 1945**, all insurance companies are **exempt** from the 1890 ANTI-MONOPOLY Sherman Anti-Trust act...& are effectively encouraged to operate as ONE COMPANY.

So there is likely no difference between your practice malpractice & general insurance/liability company...& all dental insurances. So don't be surprised if they suggest that your patients MUST fill out these exhausting & insulting forms. However, our attorneys suggest otherwise.

This is a HUGE deal! Ours is an increasingly complex & challenging dental marketplace where we continually need to do more to enjoy the same levels of growth. Obviously, we can't act as attorneys or clinicians here...we rely on expert's advice. We are simply passing their advice on to you. You may elect to investigate further. However, once this huge, obnoxious & insulting paperwork **impediment** is removed, how many more **referrals** will you receive? By how much will **acceptance levels increase**? How many **more new patients** will actually make it in? By how much will your **cancellation level decrease**? Here too, there are No Limits! jc