



Advanced Prosthetics Institute
CENTER FOR EDUCATION OF COMPLEX DENTAL ISSUES

Healthcare Referral Program – Mutual Patient Care/API

A. Program Goals

- I. To create the most comprehensive and formal referral program for dental rehabilitation in Northern Arizona
- II. Create, then expand, new patient base for partial/full mouth restoration.
- III. Establish long-term brand loyalty with Healthcare professionals.
- IV. Create a seamless, efficient and low-cost system of Mutual Patient Care between API, Healthcare professionals.
- V. Create interdisciplinary program between dental specialists required for turnkey program.
- VI. Establish lunch/dinner meetings with the top 10 referring healthcare professionals as a way to show appreciation for previous support.
- VII. Establish lunch/dinner meetings with 10 additional healthcare that are a high priority but are currently not referring to us.
- VIII. Establish priority by healthcare category, then create A/B/C list for each category

B. Protocol For Top 10 Referring Healthcare Professionals Breakfast/Lunch Program: Setting The Appointment

- I. Determine with Dr. Campbell which of the top 10 healthcare providers he personally wants to join for a breakfast or lunch meeting.
- II. Call selected offices to set a breakfast or lunch appointment with owner and their office manager or administrator.
- III. Let referring office recommend their favorite restaurant.
- IV. Call the restaurant to schedule reservation.
- V. Provide appointment information to Stacey if Dr. Campbell is to be included.
- VI. Stacey or Lori to accompany Dr. Campbell at these breakfast or lunch appointments.
- VII. In the absence of Dr. Campbell, Stacey will represent API at these breakfast or lunch meetings, Insight will be available in needed.
- VIII. Plan to arrive at restaurant 5-10 minutes prior to appointment time.



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C. Protocol For Top 10 Referring Healthcare Professionals/Lunch Program: During The Breakfast/Lunch

- I. Thank a referring practice for their past referrals and placing trust in Dr. Campbell.
- II. Be prepared to take comprehensive notes.
- III. Explain benefits of formal Mutual Patient Care Program
 - Key benefits to their patients and office:
 - *Seamless & efficient, easier to refer*
 - *Referral/patient demographic forms will be provided, can be emailed or faxed*
 - *Appointment can be made while patient is in their office*
 - *Same-day emergency appointments*
 - *Comprehensive treatment plan managed through one office for patient convenience & potentially lower costs*
 - *Interdisciplinary team of specialists under one treatment concept*
 - *Will provide protocol, forms, materials and orientation for referring office*
 - *Will provide patient educational materials/brochures at referring office*
 - *Keep updated on latest changes in technology and procedures through monthly healthcare bulletin emails*
 - *30% discounts on all services and products for referring healthcare professionals and their staff.*
 - *State-of-art technology & procedures*
 - *Specialized training in prosthetics*
 - *Co-management and new income opportunities for referring dentists*
 - *Several financing options available*
- IV. Ask what is most convenient way to share information with their office
 - Phone
 - Email
 - Fax
- V. Ask how their patient based in segmented.
 - Pediatric
 - Adults 25-54
 - Seniors 55+
- VI. Ask names of all other dentists or key staff
- VII. Ask what they specialize in (key services).
- VIII. For general dentistry (specialist) or non-dental healthcare, ask if they are accepting new patients.
 - If yes, we may be able to refer our patient to their practice
- IX. Ask who would be the primary contact for coordinating patient care.
- X. Ask if there is anything else we can do for them.
- XI. Conclude breakfast or lunch.



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C. Protocol For Top 10 Referring Healthcare Professionals/Lunch Program: Post Breakfast/Lunch

- I. Enter results of meeting/data in CRM software along with any required follow-up or next action step.
- II. Send a follow-up letter to healthcare professionals within 24 hours of breakfast/lunch meeting.
- III. Follow-up with personal visit to their office within 7 days of breakfast/lunch.
- IV. Introduce yourself to the front desk personnel.
- V. Ask for the person identified at the breakfast/lunch as key contact for referral (if person **WAS NOT** at breakfast/lunch).
- VI. Provide API informational pocket folder.
- VII. Pull out of folder and quickly review referral/demographic form.
- VIII. Ask if they would like to schedule a get acquainted in-office lunch and orientation. If yes, schedule prior to leaving if possible.
- IX. Bring and provide general practice patient brochures, appointment cards and directional maps.
- X. Enter results of office visit meeting in CRM software along with next action step.
- XI. If person you met with at office visit was your first interaction or meeting with this person, send thank you follow-up letter within 24-hours.
- XII. Follow-up by phone or in person as directed by their office or as needed (recommend every 30-45 days).
- XIII. Update your database contacts every 90 days.
- XIV. Add to list for Thanksgiving appreciation cards or Christmas cards.

D. Protocol For Top 10 Inactive High Priority Practices To Establish A Referral Relationship Breakfast/Lunch Program: Setting The Appointment

- I. Identify the top 10 healthcare offices that we want to establish a referral program with that **CURRENTLY DO NOT** refer to us, or are under referring to us.
- II. Call potential referral office to set a breakfast or lunch appointment with owner and office manager or administrator.
- III. Let them recommend their favorite restaurant.
- IV. Call the restaurant to schedule reservation.
- V. Provide appointment information to Stacey if Dr. Campbell is to be included.
- VI. Stacey or Lori to accompany Dr. Campbell at these breakfast or lunch appointments.
- VII. In the absence of Dr. Campbell, Stacey will represent API at these breakfast or lunch meetings. Insight will be available if needed.
- VIII. Plan to arrive at restaurant 5-10 minutes prior to appointment time.



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E. Protocol For Top 10 Inactive High Priority Practices To Establish A Referral Relationship Breakfast/Lunch Program: During The Breakfast/Lunch

- I. Explain that we are launching a comprehensive formal referral program and that we would like to engage with their practice for the mutual care of their patients for dental rehabilitation. Co-Management income opportunities available for referring dentists.
- II. Explain benefits of formal Mutual Patient Care Program
 - Key benefits to their patients and office:
 - *Seamless & efficient, easier to refer*
 - *Referral/patient demographic forms will be provided, can be emailed or faxed*
 - *Appointment can be made while patient is in their office*
 - *Same-day emergency appointments*
 - *Comprehensive treatment plan managed through one office for patient convenience & potentially lower costs*
 - *Interdisciplinary team of specialists under one treatment concept*
 - *Will provide protocol, forms, materials and orientation for referring office*
 - *Will provide patient educational materials/brochures at referring office*
 - *Keep updated on latest changes in technology and procedures through monthly healthcare bulletin emails*
 - *30% discounts on all services and products for referring healthcare professionals and their staff.*
 - *State-of-art technology & procedures*
 - *Specialized training in prosthetics*
 - *Co-management and new income opportunities for referring dentists*
 - *Several financing options available*
- III. Ask if they were to work with our office, what would be the most convenient way to share information with their office.
 - Fax
 - Phone
 - Email
- IV. Ask how their patient based in segmented.
 - Pediatric
 - Adults 25-54
 - Seniors 55+
- V. Ask names of all other dentists or key staff
- VI. Ask what they specialize in (key services).
- VII. For general dentistry (specialist) or non-dental healthcare, ask if they are accepting new patients.
 - If yes, we may be able to refer our patient to their practice

- VIII. Ask for their business – what do we have to do to earn it.
- IX. Ask who would be the primary contact for coordinating patient care.
- X. Invite them to tour our office, meet staff, preview cases to understand capabilities.
- XI. Conclude breakfast or lunch.

F. Protocol For Top 10 Inactive High Priority Practices To Establish A Referral Relationship Breakfast/Lunch Program: Post Breakfast/Lunch

- I. Enter results of meeting/data in CRM software along with any required follow-up or next action step.
- II. Send a follow-up letter to referring healthcare professional within 24 hours of breakfast/lunch meeting thank you for their time and look forward to working with their staff (or potential future opportunity to work with their staff) and helping their patients with their dental rehabilitation needs.
- III. Follow-up with personal visit to PCP office within 7-10 days of breakfast/lunch.
- IV. Introduce yourself to the front desk.
- V. Ask for the person identified at the breakfast/lunch as key contact for referral (if person **WAS NOT** at breakfast/lunch).
- VI. Provide API informational pocket folder.
- VII. Pull out of folder and quickly review referral form.
- VIII. IF THEY ARE READY FOR A REFERRAL RELATIONSHIP**, ask if they would like to schedule a get acquainted in-office lunch and orientation. If yes, schedule prior to leaving if possible.
- IX. Leave general practice patient brochures, appointment cards and directional maps with their office.
- X. Enter results of office visit meeting in CRM software along with next action step.
- XI. If person you met with at office visit was your first interaction or meeting with this person, send thank you follow-up letter within 24-hours.
- XII. Follow-up by phone or in person as directed by their office or as needed (recommend every 30-45 days).
- XIII. Update your database contacts every 90 days.
- XIV. Add to list for Thanksgiving appreciation cards or Christmas cards.

G. Protocol For Remaining Healthcare Professionals Not In The Top 10 Categories To Establish A Referral Relationship Program

- I. Develop a healthcare professional database by categories within your CRM software.
- II. Follow the sales protocol recommended in the CRM software.
- III. Contact remaining healthcare professionals to determine the name of office manager or administrator.



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- IV. Add names of office manager/administrators to the database.
 - V. Send out introductory program letters to remaining healthcare professionals, both owner and office manager/administrator (if applicable).
 - VI. Send out letters in manageable groups of 10-15 at a time.
 - VII. Follow-up introductory letter with phone call within 7-10 days.
 - VIII. If you are unable to reach someone on the phone within 7-10 days of the letters being mailed, call a second time within 5 days of the initial call.
 - IX. Track you calls and call dates in the CRM software.
 - X. Ask for an appointment to stop by the office and explain our program.
 - XI. If you are unable to reach someone by phone, or if you don't receive a return phone call within 2 weeks of your initial call, drop by the office and introduce yourself to the front desk.
 - XII. Ask for the person you were trying to reach. If available to see you, discuss our program with them.
 - XIII. Pull out of the API information pocket folder the referral/demographic sheet and review with them.
 - XIV. Leave an API information pocket folder for them.
 - XV. If they are interested in our program, tell them you will deliver patient brochures, appointment cards and directional maps and then do so with in 5 business days.
 - XVI. Send a thank you follow-up letter within 24 hours to the person you met with.
 - XVII. If the person you want to speak with is **NOT AVAILABLE**, ask for that person's business card and leave your business card and a API information pocket folder for that person with the front desk.
 - XVIII. Send a "sorry I missed" you letter to the person that you wanted to meet with (but was not available) within 24 hours.
 - XIX. Enter the results of your visit in the CRM software program and indicate follow-up or next action step(s).
 - XX. For healthcare professionals that have not responded, are unavailable or have not made a commitment to participate in our program, create a "drip" campaign.
 - Place them on our monthly email education healthcare bulletin of the month program
 - Follow-up with office manager/administrator with a phone call, email or letter every 60 days – the goal is to keep us top of mind
 - After 6 months of trying to establish a relationship and that goal has not been accomplished, continue with the monthly healthcare bulletin and contact every 90 days.
 - After 12 months of trying to establish a relationship and that goal has not been accomplished, continue with the monthly healthcare bulletin and contact every 6 months – this practice is not likely to refer to API.

XXI. Update your database contacts every 90 days.

XXII. Send out Christmas cards.

H. Color-Coding Patient Files

In order to easily identify a patient that has been referred to us, we will color code files with large colored dots on the front of a patient file based on category type (i.e, green for dentist, blue for chiropractors, etc.). This is a visual reminder to all staff that this patient has been referred to us based on a given category. For dental referrals, it is also a visual reminder that the patient is to be returned to the referring dentist upon discharge with appropriate exit interview communications in place.

I. Communicating Patient Treatment With Referring Healthcare Professionals

- I. After we have completed exam of a referred patient and have determined the treatment plan, we will notify referring office in writing as to our diagnostics, treatment and follow-up care – we recommend that the letter that we will sent to referring healthcare professional will be placed our files.
- II. Each time their patient returns to our office for follow-up care, if applicable, the referring office will receive correspondence regarding the patient's treatment.
- III. When the referred patient is released from our care, we will notify the referring office that no further appointments have been scheduled, treatment plan is completed, results of the treatment and that post-care treatment has been discussed with their family dentist.

J. Appreciation Events

At some point shortly after completing visits with top 20 VIP healthcare professionals we would have an open house for those groups and their staffs. Later, once, we have reached out to the majority of healthcare provides and a referral process has begun in earnest, we would have an Appreciation luncheon for **healthcare professionals and their staff (mostly staff)**.

It is anticipated this would be scheduled within 9 months of launching program.

- I. Events can be at practice or at restaurant.
- II. If at practice, event could be outside.
- III. If outside, event would be under tent with tables/chairs.
- IV. Lunch would be a themed program.
- V. Invitations would be sent as letter/flyers to referring offices.
- VI. Letters mailed 30 days prior to event.



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- VII. Second reminder mailing 10 days prior to event.
- VIII. Referring offices must RSVP 72 hours prior to event.
- IX. If event held at API and parking is a concern, we can do a remote parking location and shuttle people to and from Institute.

K. Reward-Based Referrals

As prescribed by law, a medical practice cannot pay for referrals from another healthcare source, and in some cases, incentives are also scrutinized by governing boards, such as dental and medical boards. As such, we should refrain from aggressively publicizing any type of reward or gift schedule, but the following are some suggestions on rewards for healthcare professionals that participate in our Mutual Patient Care Program.

However, for our leading referring healthcare practices, recommended rewards include:

- Tickets to concerts or events
- Gift certificates to restaurants
- Charity donation made on behalf of their practice
- After hour office parties
- Having lunch brought to their office for their entire staff
- Office gifts– artwork, plants, flowers (establish thank gift protocol to a new referring healthcare professional who refer their first patient)
- At minimum, every Thanksgiving, mail all referring practice a thank you card showing our appreciate at a traditional time of giving thanks

L. Program Tracking

In order to track all the sales activities, required follow-up service and commitments made for specific follow-up items, we will need to acquire a Customer Relationship Management software program. Our recommendation is (act.com), who provides a demo program on their websites and free trial period.

Features for managing sales/contacts/program activities include:

- Customer lists
- Follow-up activities and daily reminders
- Grouping/subgroups by specialty, company, city, zip, etc.
- Mail and email merge, including monthly newsletters, monthly eye care updates, holiday cards, birthday cards
- Outlook/Google integration
- Database management, database sharing
- Mobile devise access, online sharing
- Dashboard management
- Task manager
- Customization
- Date/time stamps

- Add document(s) capability
- Keyword reporting
- Filter features

Orientation For Referring Offices

We will need to develop with API staff an orientation for healthcare professional offices. Topics may include:

- Who we are – overview of staff and specialists
- What services we provide, case studies
- Candidates for procedures
- How to recognize need
- How to refer – use of forms
- Scheduling appointments
- Providing their patient with new patient forms, practice brochures, appointment card
- Inter office communications – keeping them informed
- Finance options
- Non-compete forms (if referral from dental practice)
- Exist interview (if referral from dental practice)