

Key Points on Handling Inquiry Calls

When a prospective patient calls the office, the primary objective is to schedule them. However, front desk personnel often make the mistake of immediately screening the patient by asking questions about insurance coverage and other information, which may make the caller feel as though you are more interested in their money than their needs.

Before collecting this information, it is important to first thank patients for their interest in the practice and assure them that they have called the right place. Be warm, friendly, and welcoming. Then it's important to steer the conversation toward an appointment by encouraging them to come in for a consultation.

Once you have scheduled the person, you can then collect any additional information you need. Handling calls in this way is more efficient, as you will answer basic, general questions, but will encourage the patient to have more detailed questions answered in the office during a consultation.

In summary, there are three objectives when handling a call from a prospective patient:

1. **Objective #1:** Focus on getting the caller to schedule a consultation
 - Thank the person for calling and make them feel welcomed. This will increase the likelihood that they feel comfortable with the practice and will want to come in.
 - Direct the caller towards a consultation—don't leave it up to them to make a choice about whether or not to come in.
2. **Objective #2:** Answer only the caller's basic questions.
 - Continue to encourage the caller to come in for a consultation to have their questions answered.
 - Avoid long discussions about fees.
3. **Objective #3:** Last, gather only essential information to keep the call as brief as possible.

When directing a caller towards scheduling, rather than asking if they'd like to come in for a consultation or otherwise leaving it up to them to decide, it's important to use the following types of phrases:

“Would you like to come in on Tuesday or Thursday?”

“We have morning or afternoon; which do you prefer?”

“We have an 8:00 a.m. or 10:00 a.m. available on Tuesday. Which of those works better for you?”

SAMPLE SCRIPTS

The following scripts are examples and guidelines.

Script 1

CALLER:

“How much will it cost for me to get a crown?”

PATIENT COORDINATOR:

“That depends on a number of clinical issues that we can better determine in your consultation, but the cost can range from \$____ to _____. You will get x-rays when you come in for your consultation, and we will be able to give you more exact costs then. We make sure our fees are competitive with other practices in the area and the consultation is free. Let’s go ahead and get you scheduled.”

Script 2

CALLER:

“I am supposed to get a crown on an implant, and I am looking for the best person to do it.”

PATIENT COORDINATOR:

“Well, you called the right office! We specialize in (specific type) dentistry, and our doctors are experts in implant restoration. First, let’s get you scheduled for your consultation, and then I’ll have some additional questions for you.”

Script 3

CALLER:

“Does the doctor go over the difference between a bridge and a partial denture?”

PATIENT COORDINATOR:

“Yes, absolutely. We will have the doctor go over this with you as part of your consultation.”

Script 4

CALLER:

“My dentist didn’t say anything about _____.”

PATIENT COORDINATOR:

“I’ll make sure this is addressed when you come in for your consultation. I’ll get you scheduled right away.”

Script 5

CALLER:

"I am very nervous about doing this. I would like to be put out during the procedure."

PATIENT COORDINATOR:

"I understand. We get quite a few patients who prefer sedation. Let's get you scheduled for the consultation, and we'll get you totally prepared for that."

Script 6

CALLER:

"I have a bunch of questions!"

PATIENT COORDINATOR:

"Well, thanks for calling! I'm happy to answer whatever I can."

CALLER:

"I'm really wondering what an implant is going to cost."

PATIENT COORDINATOR:

"Well, that depends on what is needed. Most practices that tell you a fee over the phone are estimating, but to get reliable information, you'll need an introductory consultation, which we offer at no charge. During your consultation, the doctor will be able to look over your x-rays and determine exactly what would be involved. But to give you some idea, the common range for what you're asking about is \$_____ to _____."

Script 7

CALLER:

"Well, I should probably wait until after the first of the year when my benefits renew."

PATIENT COORDINATOR:

"Yes, that might not be a bad idea. But I suggest that you get things looked at now. You are going to want to know if there are any complications, and the doctor will be able to answer any questions you have. Then we can always schedule you at a time that is most convenient for you."

Script 8

CALLER:

"Gosh! I have lots of questions. I hope you don't mind."

PATIENT COORDINATOR:

"Not at all! We love to answer patient's questions! How about this? Why don't I get you set up to come in for your free consultation? That way you can meet directly with the doctor and staff and get exact answers to all of your questions."

Script 9

When discussing insurance coverage, if the caller has an insurance type that the practice does not work with you can use the following script. Continue to be helpful to the patient, and don't be dismissive. The caller could end up referring others to the practice just because you were extra helpful.

PATIENT COORDINATOR:

"OK, you are all set for Friday the 24th at 8:00 a.m. What type of insurance do you have?"

CALLER:

"I have Blue Shield of Wisconsin."

PATIENT COORDINATOR:

"Oh, gee! I am sorry to hear that. Our office is not contracted with that plan. Let me recommend an office close to you." (if you know of one)