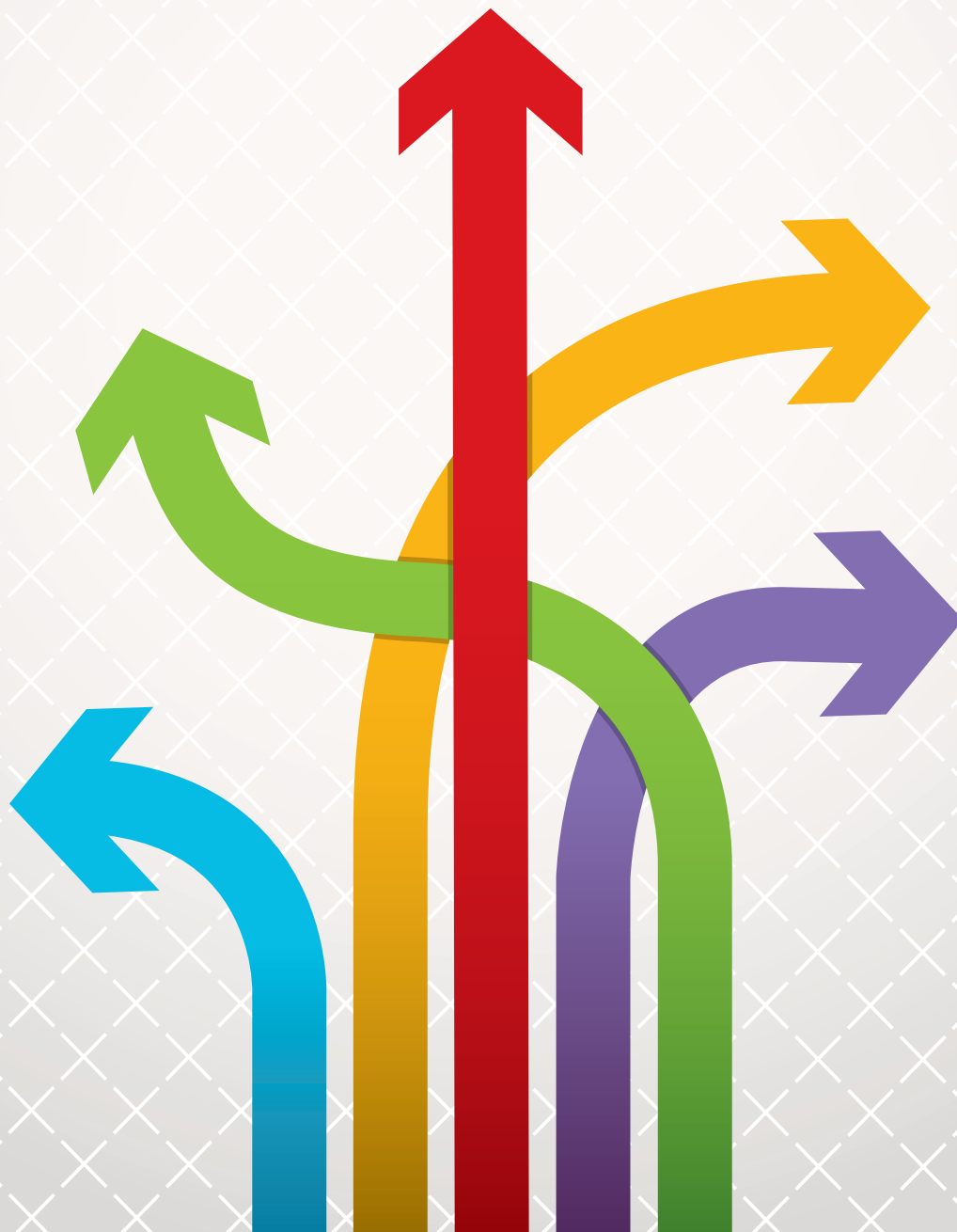


THE FIVE STAGES OF CLOSING



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Practice Production Whitepaper Series



Levin Group^{Inc.}



THE FIVE STAGES OF CLOSING

Introduction

Levin Group has pioneered a new case presentation system that is revolutionizing client practices. This method is a response to changing consumer buying behaviors in the post-recession era. Until 2007, many consumers could be categorized as impulse buyers. If they could either pay out-of-pocket or access credit, they made quick purchasing decisions. Think of the popularity of esthetic dentistry in the early 2000s. While dentists credited new materials and presentations as the primary reasons for increased cosmetic case acceptance, they discounted the fact that consumers everywhere were buying at unprecedented rates. If there was a positive high-value service such as esthetic dentistry, implant dentistry, orthodontics, etc., consumers were inclined to accept treatment.

All of this has changed since the recession. In a recent *Wall Street Journal*¹ article focused on individuals with incomes between \$200,000–\$250,000 per year, it was pointed out that these consumers now ask the following three questions prior to making a purchase:

1. Do I really want it?
2. Do I want it now?
3. Do I want to buy it here?

This is a seismic shift in consumer psychology and behavior. No longer are consumers of almost any income level simply making impulse purchases. This change has created downward pressure on case acceptance in dental practices. The cost of the average accepted case is lower than the pre-recession era, the number of rejected cases is increasing, and more patients are settling for less than optimal treatment.

Dentistry Is Changed Forever

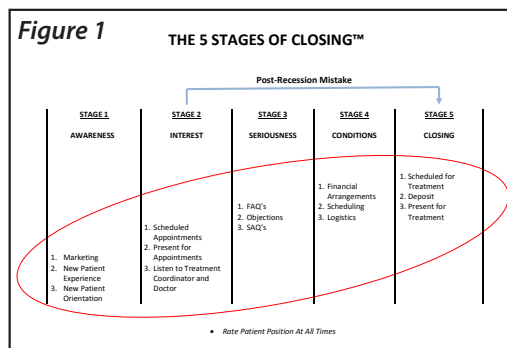
The 5 Stages Of Closing[™] was created in response to changes in case acceptance. During the recessionary years and now in the post-recession, patients are changing how they make decisions. Businesses attempting to market and sell their services the way they did in the pre-recession era will have a difficult time today. This shift has opened the door for innovators who understand how post-recession consumers think. They have less discretionary income and are less likely to be persuaded than in the early 2000s.

Understanding the psychology of today's consumers has necessitated a new approach to case presentation, which is why we developed *The 5 Stages Of Closing*[™]. Practices that do not pursue new case presentation methodologies will either be involved in a high volume of small cases or have an increasing number of cases rejected. Neither is an optimal result. A healthy balance of smaller cases and larger cases indicates a growing practice. To achieve such a balance, a new approach to case presentation is essential.

The 5 Stages Of Closing[™]

The 5 Stages Of Closing[™] is based on a comprehensive study of the science of influence. The ability to influence patients affects almost every system in the practice, including case presentation, scheduling, patient referrals and collections. After extensive testing, *The 5 Stages Of Closing*[™] has proven to be one of the best new approaches to increasing case acceptance that I have come across in my career both as a practicing dentist and as the CEO of Levin Group. This revolutionary new case presentation method, as seen in Figure 1, includes:

1. Awareness
2. Interest
3. Seriousness
4. Conditions
5. Closing



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These 5 stages create an entirely new approach to understanding case presentation. Patients who receive a case presentation can now be scored against the 5 stages. Each stage represents a critical aspect of achieving case acceptance and increasing practice production. For the first time, dental practices have the opportunity to operate at a sophisticated level by understanding exactly what steps are needed to move a patient to Stage 5. It is also important to note that skipping a step will often result in case rejection.

Case presentation has always been one of the most misunderstood systems in dentistry. I have heard statements throughout my career such as, "I simply present the case and it is the patient's responsibility to decide what to do." While this may have been true 20 or 30 years ago, it is completely invalid for post-recession patients. Patients today are not as quick to make decisions. This is why *The 5 Stages Of Closing™* includes steps that allow the doctor or treatment coordinator to help the patient move through each stage, resulting in treatment acceptance.



Stage 1 - Awareness

Before patients accept any type of treatment, they must first have some knowledge that the service is available at the practice. Only by creating awareness do patients become potential candidates for treatment.

Marketing

Awareness is generated through the practice marketing program. Levin Group has found that internal marketing is the least expensive and most effective form of marketing available for general dental practices. Eighty percent of external marketing activities by dental practices have a negative return on investment. With a minimum of 15 custom strategies in place, internal marketing can greatly increase patient awareness about practice services.

The New Patient Experience

The New Patient Experience starts with a patient calling the office. The team uses Value Creation Scripting™ to build confidence for the doctor and practice. This approach includes customized language that focuses on attributes of the practice, transfer of trust to the doctor and a review of services. The target is to have 98% of all callers schedule appointments.

The New Patient Orientation

When patients present to the office, it will be the first direct opportunity to impress them. The key is to make patients aware that cosmetic services are available and that they can make a tremendous difference in the quality of people's lives.

Stage 2 - Interest

Dentists often know when patients have an interest in treatment. Consequently, doctors often jump directly from Stage 2 – Interest right to Stage 5 – Closing. In the new economy, this does not work. Remember, how people make their purchasing decisions has changed.

Diagnosis

Diagnosis is more than just clinical assessment of the patient. Too many practices view a new patient's first visit as a clinical examination, tell the patient what is found and what is recommended, and then let the patient decide what to do. This only works when the majority of cases presented are relatively small.

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Education

The doctor should be positive and informative so that the patient develops a full understanding of the diagnostic findings before a treatment recommendation is given. Patients are delighted when they are included in the conversation, fully understand the situation and feel positively about the doctor and staff. The dentist should focus on the benefits of treatment rather than overwhelming patients with clinical details.



Services

Practices are often selective in discussing their service mix. Consequently, many patients are not aware that their practice offers a full range of dental services. Many patients still view their dental practice as a place where they have their teeth “cleaned” and cavities filled. Without explaining the practice’s range of services, many patients have no idea that they are available.



Stage 3 - Seriousness

One of the major mistakes that dentists and treatment coordinators are making today is mistaking Stage 2 – Interest for Stage 3 – Seriousness. In the past, patients could move from Stage 2 directly to Stage 5 due to the more impulsive decision-making at the time. Dental practices today that attempt to move patients directly from Stage 2 to Stage 5 will find many treatment plans rejected or indefinitely put off because patients are not yet comfortable making a decision to have treatment.

Frequently Asked Questions (FAQs)

Whenever information is provided to patients, there will be questions. Patients want to understand why treatment is being recommended. Unlike in the past, patients have become more hesitant about whether they will accept treatment. As questions are answered, patients often move forward with objections.

Objections

Many dentists and team members react negatively and defensively to objections, feeling that their expertise is being questioned. In truth, objections are normal. I have repeatedly stated in seminars that objections are part of closing the case. The patient is basically saying, “If you answer my objections properly, I am very serious about having treatment.”

Should-Have-Asked Questions (SAQs)

These are questions that the patient did not ask, but if they had, they would have been more likely to accept treatment. Many dentists have told me how they have been fooled into thinking that the case was closed only to find out this wasn’t true. To prevent such a situation from happening, cosmetic practices can say, “One question you might want to know the answer to is...”

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Stage 4 - Conditions

This stage is probably the most important. Consumers and patients today are very concerned about how much they are spending, how they are spending it and when they spend it. If Stage 4 is not properly handled, patients will reject the case presentation.

Financial Arrangements

Levin Group traditionally recommends what we call The Four Financial Options™—key payment choices that make treatment affordable for each patient. It is important to present several options and allow patients to decide which one is in their best interest. Due to the increasing numbers of patients who can't afford to pay out-of-pocket, the practice should offer patient financing as an option.

Scheduling

Once the patient has selected a financial option, use Value Creation Scripting™ to select a mutually agreeable appointment. Effective scripting emphasizes patient convenience, while allowing the practice to maximize its schedule. If patients are willing to make an appointment, this obviously indicates that they intend to have treatment. But people can change their minds up until the last minute. That's why it's important to follow the remaining steps.

Logistics

This step covers the length of the procedure, recovery and healing time, and how many appointments are required to complete treatment. A critical aspect of the logistics discussion is uncovering *unrealistic expectations*. Perhaps patients think there will be almost no discomfort... it will take fewer appointments... or they will look 10 years younger when treatment is completed. To prevent any "surprises," ask a few questions at the end. These should be yes-or-no questions, allowing the patient to focus on final decision-making, such as:

- If we can do this in the morning, will that work for you?
- If we can use patient financing to arrange a six-month interest-free line of credit, will that be helpful?
- If we can complete the case in four appointments, will that be sufficient?

These and other questions lead the patient to a final decision. It also allows them to recognize any *unrealistic expectations*.

Stage 5 - Closing

If the first four stages and all of the factors are properly covered, then the patient is essentially closed. It would be rare for patients to change their mind. In fact, the show rate for the first appointment following *The 5 Stages Of Closing*™ is extremely high.

Scheduled

Note that the first factor is not "scheduling", but "scheduled." The patient has made an appointment to have treatment. Since *The 5 Stages Of Closing*™ are not about hard selling, but a cooperative process of determining the treatment plan and gaining acceptance, patients are unlikely to change their minds at this stage.



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Deposit

Levin Group instituted a request for a deposit when no-shows and last-minute cancellations became commonplace during the recent economic downturn. Our recommendation was that any treatment plan more than \$1,000 required a 10% deposit to hold the time exclusively for the patient. Value Creation Scripting™ was put in place to assist practices in making this a positive request and the no-show rate for patients who placed 10% deposits is almost zero. This is not mandatory, and if the practice does not have a no-show or last-minute cancellation rate higher than 1%, it does not need to follow this protocol.

Present for Treatment

Here's the ultimate proof that the patient will follow through with treatment recommendations. While scheduling and deposits are reassuring, the patient actually showing up for treatment is the true mark of success. If there are concerns about a patient following through, the practice should confirm the appointment with the patient via his or her cell phone. Use this call as an opportunity to review the value and create new excitement for the patient.

Conclusion

The 5 Stages Of Closing™ is a breakthrough in case presentation that allows dental practices to accomplish two functions:

- 1) Identify what stage the patient is in when seeking treatment.
- 2) Have a scientific process to move the patient from one stage to the next, with the highest possibility of case acceptance.

The 5 Stages Of Closing™ is the best method ever created to help practices understand patient psychology, which stage the patient is in and how to achieve the Levin Group target of closing 90% of all cases. All staff members need to be trained in *The 5 Stages Of Closing™*, including the front desk staff. Keep in mind that patients will ask questions at the front desk following treatment presentation based on the psychological principle of validation. In many cases, it is actually a front desk staff member who affirms the final decision to close.

The 5 Stages Of Closing™ is not an overnight process. Anyone following this protocol will gradually improve through time and practice. But with proper training and attention to detail, your practice is guaranteed to become more efficient and more profitable over the long term. So start using *The 5 Stages Of Closing™* today and watch your practice be transformed!

Dr. Roger P. Levin

Dr. Roger P. Levin is a third-generation general dentist and the Chairman and CEO of Levin Group, Inc., the largest dental practice consulting firm in North America. A keynote speaker for major dental conferences, Dr. Levin presents more than 100 seminars per year. He has authored 68 books and more than 4,000 articles. In 2014, he received the Dental Excellence Award for Best Practice Management Consultant from *DrBicuspid.com*. For the past 12 years, he has been named one of the "Leaders in Dental Consulting" by *Dentistry Today* magazine.



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ADDITIONAL RESOURCES:

The 1-Hour No-Cost Practice Diagnosis, Only From Levin Group

Take the first step to a thriving practice. Schedule a simple yet powerful phone call with a Levin Group Certified Practice Analyst, who will assess the current state of your practice and reveal how you can improve practice production.

Call 888-973-0000 to schedule your complimentary evaluation today.



Your First Step to Higher Income — A Practice Performance Analysis™

Get the peace of mind you deserve... with a Practice Performance Analysis™. More than 5,000 dentists and specialists have used this analysis to gain a better understanding of their practice. You owe it to yourself.

Conducted at your practice with minimal interruption to your business operations, the analysis will give you the information you need to make positive changes in your practice. To find out how one of our Certified Practice Analysts can provide the objective information and insights you need to increase production, call 888.973.0000 or visit www.levingroup.com/analysis.

