
Connect with your patients over the phone

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In this guide, you will find ideas for consideration to apply and modify to your specific situation and opportunity.

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Preparing for outbound phone calls

Outbound phone calls do take time, but can be very effective if planned properly.

You may have several employees within your office who are responsible for outbound phone calls. Being fully prepared by taking the time to understand who you are calling and the objective of the call is well worth the time.

Know who you are calling and for what purpose

- | | |
|--|--|
| <input type="checkbox"/> Current patient for wellness check | <input type="checkbox"/> Current patient for annual hearing evaluation/upgrade |
| <input type="checkbox"/> Current patient to schedule service appointment | <input type="checkbox"/> Prospect to schedule hearing evaluation appointment |
| <input type="checkbox"/> Current patient for annual hearing evaluation | <input type="checkbox"/> Prospect to reschedule hearing evaluation appointment |

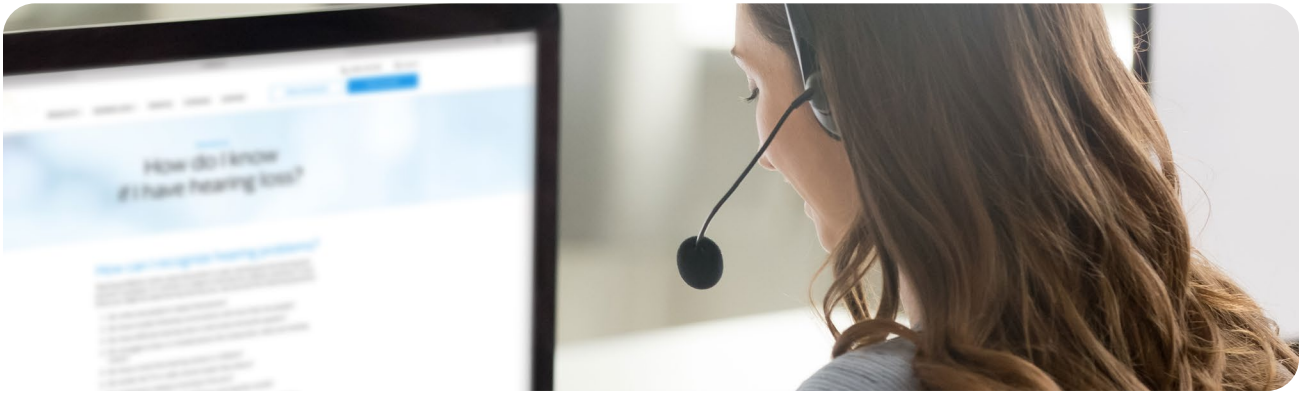
Current Patient

- **Familiarize yourself with their activity by reviewing their patient file and/or notes in your Office Management System (OMS):**
 - ◆ When was the last time they were seen?
 - ◆ How old are their current hearing aids?
- **Verify contact information and contact permissions. Be sure to complete and confirm the contact information in your OMS.**
 - ◆ Accurate phone number landline and/or cell phone
 - ◆ Email address
 - ◆ Full mailing address
 - ◆ Is their record marked with “do not call,” “do not email,” or “do not mail”?
 - ◆ Emergency contact information

Prospective Patient

- **How did they originally find your office?**
 - ◆ Direct mail
 - ◆ Referral
 - ◆ Open house
 - ◆ Advertising
- **What is the reason for follow-up?**
- **How long ago was their most recent interaction?**
 - ◆ Prospects have a shorter window when it comes to telemarketing. If you have not been in touch for 3+ months, make sure that their phone number is not on your state’s Do Not Call list. With privacy regulations, you will need to show that you have an in-office process.
- **Prepare your questions and scripts as needed.**

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Best practices to follow during your phone call

This phone call represents you, your colleagues and your business or practice.

Think positively and remember to smile. You want the patient to feel how important they are and to understand that your main concern is to help them hear their best.

- Put a smile in your voice.
- Initially address the patient/prospect by first and last name, unless you have an established relationship with an existing patient and feel comfortable using their first name.
- Let the patient know your name, what office you are calling from, and why you are calling.
- Speak slowly and clearly. Remember, we typically are communicating with households who have an older demographic. Make an effort to help them hear you the first time.
- Subsequently use their first name during the course of your conversation – this is a personal call, about their individual situation. Listen. Allow the patient some time to fully express their thoughts and answer your questions.
- Be conversational. Ask your script questions, let the patient answer, and then ask follow-up questions if necessary for more clarification.
- Verify address, phone number and email if this information hadn't been verified within the past year.
- Take good notes about the conversation. These notes should be included in their OMS record or file and available to other office staff members for review. You will be happy you added these notes when you pick up the phone to call them again the next time.

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Tips for ending a call and important follow-ups

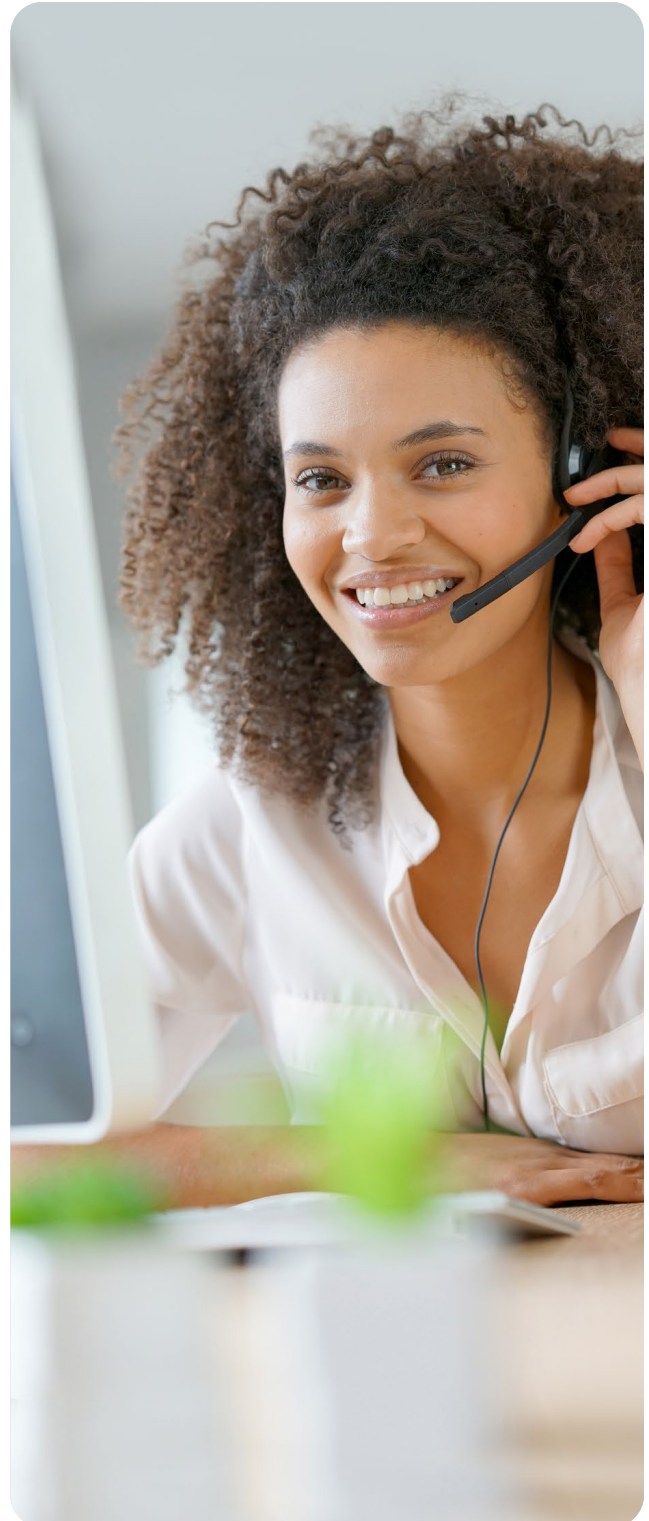
Close:

- **Lead your conversation toward the objective of the call. For example,**
 - ◆ Curbside check-in
 - ◆ Appointment for updated hearing evaluation
 - ◆ Trial of new hearing aids
- **Thank them for their time and let them know you look forward to seeing them.**
- **If no action is taken today, ask for their permission to follow-up again in “XX” weeks/months.**
 - ◆ “I know you aren’t ready to schedule your appointment with us today. Would you mind if I followed up with you again next month?”

Follow-Up:

- **Add all notes to their record in your OMS and/or Patient File.**
- **Add appointment and any appointment reminder processes to your OMS and/or Patient File.**
- **Add next call/follow-up to your call calendar.**

Think positively and remember to put a smile in your voice. You want the patient to feel how important they are and that your main concern is to help them hear their best.



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Do Not Call state and national regulations

Most of the time, when you are outbound calling patients within your own database, your risk of non-compliance within state telemarketing laws would be low. You should be familiar with regulations and gain access to the state level Do Not Call lists.

A nuance surrounding telemarketing is the “established business relationship provision.” Although a consumer may have placed their phone number on a Do Not Call list, if you have an existing business relationship, the regulation is relaxed.

A company with which a consumer has an established business relationship may call for up to 18 months after the consumer’s last purchase or last delivery or last payment, unless the consumer asks the company not to call again. In that case, the company must honor the request not to call. If the company calls again, it may be subject to a fine.

If a consumer makes an inquiry or submits an application to a company, the company can call for three months. Once again, if the consumer makes a specific request to that company not to call, the company may not call, even if it has an established business relationship with the consumer.

A consumer whose number is not on the national registry can still prohibit individual telemarketers from calling by asking to be put on the company’s own Do Not Call list.

Resources:

<https://www.donotcallcompliance.com/do-not-call-laws.html>

<https://thedma.org/resources/compliance-resources/do-not-call-lists/>

