

As we all know, we work very hard to fill and keep a productive schedule. It is not only a loss of production but, frankly, a disappointment when patients cancel at the last minute or worse yet, do not show for the appointment. Sometimes there are very good reasons for these last minute changes to the schedule but at times there are patients who simply run their lives this way – always changing their personal schedule and not understanding how it affects others. Generally, we attempt to work with these changes and “roll with the punches” but there are definitely times where an escalation in the manner in which we handle these patients is required.

It is our hope that by implementing and discussing our office *Cancellation Policy* can minimize repeat cancellations or no shows from patients. The ultimate purpose in discussing the cancellation policy with the patient is so they understand and will not do it again in the future. This is **not** meant to be a punishment, but to simply help the patient realize the loss of production for the office and to give the patient an incentive to keep existing appointments or change them with advanced notice.

**Example Policy:**

1. For patients that give enough notice and reschedule to a future date, there is no need to tell a patient who would never cancel or not show an appointment about the policy.
2. First Time Offenders of canceling last minute or not showing up: If the patient has not canceled last minute in the past and/or feels very bad or has a “real reason” then the policy is verbally told to them and documented that they were told. An example of this is patient who:
  - a. Cancel within 48 hours
  - b. Attempt to cancel within 48 hours
  - c. No Show. These patients are verbally told the **cancellation policy**. “*When canceling within 48 hours (No Showing an appointment) there might be a \$75 charge. The first time is waived, but any further last minute change, the fee may be applied.*” The policy is told in a light and nice manner and is just a review of the policy and hopes that they understand that our staff’s time is valuable.
3. **Notes** are then placed in the Chart that the policy was reviewed and by which employee.

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4. **A Pop-Up** is placed in the chart.
  - a. Missed appointment 1 – Policy reviewed
  - b. Missed appointment 2 – Fee applied (the idea here is to not apply the fee but to express the sense of importance to that patient)
  - c. Missed appointment 2 – Fee waived – Last time (See Lee-Way below)
  - d. Multiple missed appointments – refer to notes
  - e. Same day appoint only
  - f. Do not reappoint
  
5. **Applying Fee:** No Code: NOSHWH can be found in the Patient's Account or Ledger or in the Patient's Chart under MISC tab.
  
6. **Exception to the Rule:** Any staff trained to answer the phones can decide to accept a last minute cancellation or No Show based on the patient's response and not apply the \$75 fee. If the staff member feels the patient had a good reason or is truly sorry and understands the importance of keeping appointments they can waive the Fee a final time.
  - a. A patient can only have a second chance at the fee being waived once. Meaning the patient automatically get the first fee waived, but the second occurrence fee can only be waived ONCE.
  - b. Notes are to be placed in the chart; what was said and that the fee was not applied
  - c. Alert the patient that we cannot waive the fee again.
  - d. Leave the Pop up on the last level it was on.
  
7. **Same Day Appointment Only/Executive Plan** – On occasion there is an extremely well intentioned patient who has a difficult time running their personal schedule, but is truly reaching for continued care in our office. After discussion with the Office Manager it may be decided that Same Day Only/Executive Plan may be allowed for this patient. Basically – they can call in and see if an appointment is opened. They can be seen Same Day ONLY. Patients who miss a Same Day Only appointment are released from the practice – No Cancellation Fee is necessary.
  - a. **The verbal skills for this patient are something like this,** “We have an Executive Plan for patients like yourself that seem to have conflicts in their schedule last minute. What we have for patients like you is our executive plan (Same Day

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Only), which allows you to call us when you know you can make it and we will do our best to try to get you in on that same day.”

**Options for some verbal suggestions:**

**Insurance related:**

"We will do everything we can to maximize your benefits"  
"As a courtesy, we will submit your insurance claims for you"  
"Oftentimes, in and out of network benefits are not that different”

**Price shoppers:**

"We would love to have you come in and meet the doctor"  
"We are not able to diagnose over the phone..."  
"Dr. would like to meet you and determine the best treatment for you"  
"I don't want to misinform you regarding the price"  
"I want to be sure to give you the most accurate information"

**Hygiene cancellations:**

"Is there anything we can do to help you keep this appointment?"  
"We want to make sure you stay on a regular schedule with your cleanings"  
"It looks like you are due for your oral cancer screening"  
"We want to keep you healthy!"

**Doctor cancellations:**

"I know Dr. is concerned about that tooth"  
"I don't want you to have an issue later if you delay this treatment"  
"Dr. just mentioned you in the huddle this morning!"

**A few examples of how to replace negative words/phrases with positive words/phrases:**

Cancellation - Change in schedule  
Unfortunately - Luckily  
I'm sorry - Thank you for understanding  
Just a cleaning - Hygiene or recare appointment  
Our policy says - While I am unable to x, what I can do is x  
No - What I am able to do is

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### Problem - Situation, challenge

8. Patients who are **upset** about the Cancellation Policy should be routed to the Office manager.
9. Patients who violated the policy and the fee was applied then decided to **leave the practice** over the fee will be encouraged to do so. If this same patient wants to come back that is *excellent* – After they pay the fee. During this inactive time *the fee will not be “collected on”* it will only be used as a signal of past no shows or canalizations.

In Closing – The Last Minute Cancellation Fee or No Show Fee is **not a Punishment**. The *singular* most important goal of the Policy is to **KEEP THE SCHEDULE FULL AND PRODUCTIVE**. The secondary goal is keep patients who do cancel or no show from doing it again. The least important part of the ENTIRE policy is the collection of the fee.

### Cancellation Policy for ASAP Lists

This policy is established to ensure accurate and efficient management of appointment cancellations in the practice management software. Too many times canceled appointments end up in the ASAP or Short Call List and that is not necessarily where we want the appointment to live. The ASAP list (or whatever it is called in the PMS) is a place where you can call patients when you have a quick need to fill an appointment. If it gets filled with a lot of appointments that are truly not “quick fill” then it cannot help when cancellations happen.

- The primary objective is to prevent patients from being automatically added to the ASAP (as soon as possible) list without proper consideration.

### Thorough Evaluation of Cancellations:

- When a team member cancels an appointment, they must carefully read and respond to all prompts and questions regarding the rescheduling or reassignment of the appointment.

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- Rushing through the prompts or selecting default options without thoughtful consideration is not allowed.
- Team members are required to take the necessary time to evaluate each cancellation and make a deliberate decision regarding the appropriate course of action.

### **Assessing Long Lists:**

- If the office encounters consistently long and unreliable lists of patients, the team must investigate the underlying reasons and address them proactively.
- Team members should identify any flawed processes that contribute to the creation of inaccurate lists.
- A thorough evaluation of existing workflows should be conducted to identify and rectify any inefficiencies.

### **Starting Fresh:**

- If the office decides to start anew and not go through the entire existing list, they may choose to delete the current list and establish a fresh start.
- The decision to delete the list should be carefully considered and implemented in conjunction with the new policies and processes put in place to maintain list accuracy moving forward.

### **Dedicated List Cleaning:**

In situations where a comprehensive list cleanup is necessary, the office may assign a dedicated team member to the task.

- The assigned team member should actively work to clean up the list by verifying patient information, contacting patients as needed, and updating the records accordingly.
- It is important to note that manual list cleanup can be time-consuming and may result in outdated information once the list is printed. Therefore, efforts should be made to adopt a more efficient and automated solution.

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**Software Assistance:**

Utilizing specialized software, such as Dental Intel or similar platforms, is highly recommended to maintain accurate and up-to-date lists.

- The office can explore software options that integrate with the practice management software to streamline list management and enhance data accuracy.

**Implementation and Training:**

- This policy shall be communicated to all staff members involved in appointment management.
- Adequate training and resources should be provided to help staff understand and adhere to the policy effectively.
- Regular audits and performance evaluations should be conducted to ensure compliance with the policy guidelines.

Note: This policy is a general guideline and may need to be tailored to the specific needs and requirements of your office.

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