

The Fee-for-Service Readiness Check.

BEFORE YOU START

Most owners think of marketing as a line item and insurance patients as the ones who arrive for free. They don't. If you write off 30–40% to a plan, that discount is a patient-acquisition cost, just paid in a currency that never shows up on the marketing line.

The real question was never "start spending or not." It's whether your practice is ready to turn attention into patients before you pay for the attention.

One rule as you go: answer honestly, with numbers where a check asks for them.

01 Do your new-patient calls actually convert?

The one that governs everything else, and most practices don't know their number. We review ~6,000 calls a month; about half of new-patient callers end up booked. The strongest offices run 60–80%.

- ☐ **Yes** — 50%+ of genuine new-patient calls become appointments, and I know because I've listened to them.
- ☐ **Not yet** — I haven't listened, or we're under 50%.

| **If not yet:** this is the highest-return, lowest-cost fix you have. Listen to 20 calls this week.

02 Can your team say "no, but..." instead of just "no"?

Out of network, "do you take my insurance?" gets a no. What happens in the next four seconds decides whether they book. A membership plan gives your team somewhere to take the call.

- ☐ **Yes** — we have a plan, priced sensibly (~\$400–450/year with ~10% off treatment, or ~\$25/month managed with a larger discount), and the team brings it up without being prompted.
- ☐ **Not yet** — no plan, or it sits unmentioned on the website.

| **If not yet:** a plan provider or dental CPA can build it; then the team has to be trained to offer it with conviction.

03 Are about half your new patients arriving on a referral?

This one can't be bought, which is exactly why it's the truest signal. If people aren't talking about the visit, the visit isn't yet worth the premium you're about to ask for.

- ☐ **Yes** — roughly 40–60% of new patients came because someone sent them.
- ☐ **Not yet** — well under 40%.

| **If not yet:** fix the visit before you buy attention. Usually it's that nobody asks patients to refer, or the experience is competent but unremarkable.

04 Is there room in the schedule?

A referred patient will wait four weeks. Someone who found you on Google at 9pm will not, they book with whoever sees them first. A full schedule quietly turns your marketing away, and it reads as marketing that didn't work.

- ☐ **Yes** — I can see a new patient within about a week, or I hold new-patient blocks on purpose.
- ☐ **Not yet** — new patients wait more than a week and we hold nothing.

If not yet: hold a few blocks and protect them. It costs nothing and works immediately. Plan for same-day treatment to fill the chair time going out of network frees up.

05 Does your team believe the practice is worth it?

No campaign reaches the half-second before someone quotes a fee. If the person answering the phone privately thinks you're expensive, the caller hears it. This check gates all the others.

- ☐ **Yes** — everyone on my team can explain, without flinching, why a patient should pay more to be seen here.
- ☐ **Not yet** — one or more would default to "well, your plan..."

If not yet: this is a leadership and coaching conversation, and it usually lands when you connect the write-off to the team. It's why raises are hard and the equipment request keeps getting deferred.

YOUR RESULT

COUNT YOUR YES BOXES

5 of 5

You're Ready

Marketing will do real work, and it tends to work faster for practices with the foundations already in place.

4 of 5

Basically Ready

Shore up the one gap as you start rather than waiting.

3 of 5

Borderline

Fix the two gaps before you spend, or you'll buy a bigger audience for a problem you haven't solved.

2 or fewer

Not Yet

And that's useful to know now. Spend the next two quarters on the items above; you'll get more out of that than out of any agency.

When You're Ready, Let's Look At Your Numbers.

Book a call and we'll go through your actual numbers with you. You'll get something useful out of it whether or not you hire us.

Book A Call

