



My year of yes: Align® consulting service helps Michigan orthodontist reinvent her practice

Kathryn Swan, DDS, MS - Swan Orthodontics - Grand Rapids, MI - Invisalign® Provider Since 2008



When Dr. Kathryn Swan opened her first orthodontic office in 2008 in Grand Rapids, Michigan, she knew she was facing the challenges and hard work that accompany all professional startups. Little did she know that times were about to get a lot tougher. Just 11 days after she opened her office, the market crashed and the country entered a recession – a recession that hit the state of Michigan especially hard.

While acknowledging that the hole she started in was a bit deeper than expected, Dr. Swan stayed the course. Along the way, her willingness to embrace change has been integral to her success. Recently she participated in an Align pilot program designed to digitally transform her practice. Here she tells the story of how the Align Digital and Practice Transformation (ADAPT) service helped her reinvent her practice and implement changes that have enhanced both her bottom line and her office environment.

Q. Your journey as an orthodontist got off to a rocky start. What do you recall about that time?

- A. I saw the practice purchase as an opportunity. While it was just a one-and-a-half-day satellite at the time, it was in a newer area of Grand Rapids. Because I was willing to work hard and believed I could grow the business, I took the plunge. The economic recession and its timing definitely posed some challenges, but we were able to hold on. When the lease on the office ended, we moved to a bigger and more visible facility, which helped a lot. I didn't let the setback stop me from trying different things and marketing to different kinds of patients. When I started, my patients were almost exclusively kids, but with time I began treating more parents as well. The adult segment of my practice really took off in 2016 when I began offering Invisalign treatment.

Q. How did you make the decision to become an Invisalign practitioner?

- A. I saw it as an opportunity to provide a service that I knew patients wanted and weren't necessarily getting elsewhere. I looked around my area and realized that most of the orthodontists geographically closest to me weren't doing Invisalign treatment – or they were reserving it for those cases in which their patients really insisted on it. Although I was already trained in Invisalign treatment through programs like Align Intensive Fellowship and Your Ortho Coach, I decided in 2016 that it was time to jump into the deep end of the pool. I had what I call “the year of yes.” I decided that whenever an eligible patient came into my office and wanted to be treated with aligners, I would say yes. It didn't matter how hard the case was – if Invisalign treatment was an option and was what the patient wanted, I would figure out a way to do it. The Align experts helped make this possible, and they bailed me out on multiple occasions. By then, we had also purchased an iTero® scanner, which really helped. I had become frustrated trying to train new assistants to take accurate PVS impressions, and the scanner made Invisalign treatment much easier.



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Q. In late 2018, you had the opportunity to participate in an Align® pilot program that was designed to help doctors like you reinvent their practices as digital practices. What were you looking to gain from this program?

A. The program is called Align Digital and Practice Transformation, or ADAPT. The idea behind the program is to provide practices looking to significantly increase their Invisalign share of chair with personalized analysis and support to help manage the transition. Through this program, we had one-on-one access to experts in finance, communications and marketing. They performed an in-depth analysis of our work processes and patient

flow, identified areas for improvement and created a customized plan that would enable us to improve our efficiency and profitability. In the process, my Invisalign share of chair went from 31% to 68% in just a year.

Q. How did the ADAPT team go about analyzing the processes in your practice?

A. Once we agreed to participate in the program, things moved quickly. Following a couple of phone interviews, consultants came to the office at different times. They dug deep into our numbers, asked a number of questions and watched us work. They provided everything from communications experts who analyzed our

intake process with patients to financial analysts who calculated the percentage of patients we needed to have on payment plans to a Six Sigma expert who analyzed whether our assistants were wasting any steps in accessing supplies.

At the end of the analysis period, the experts came back and gave us a comprehensive presentation on areas where we needed to improve, as well as potential challenges we would experience in addressing them. I found they did a really good job of anticipating bumps we would experience along the way. They were usually a step ahead of us.

Change #1: Reinventing payment plans

Q. Prior to the analysis, your payment structure for orthodontic services was pretty traditional. What were some of the changes the ADAPT team identified for you?

A. One of the biggest areas of change was letting go of some of our long-held assumptions about financial management of Invisalign patients. Because of the upfront lab fees associated with Invisalign treatment, we had been charging a premium for Invisalign treatment over braces. Conventional wisdom had also dictated to us that we collect as much in the way of fees upfront with these patients. Finally, we ensured that patients finished paying for treatment before treatment was completed, because we believed patients needed this incentive to pay.

The ADAPT team challenged all of these assumptions.

- They explained that if we wanted to increase our Invisalign conversion percentage, we needed to offer Invisalign treatment at the same price as braces.
- They further explained that asking patients for a large upfront payment to cover the lab fees would be a significant deterrent to patient acceptance.
- They recommended we let patients stretch their payments over three years instead of two. The rationale was that while we would be collecting less money upfront, the increase in patient numbers would help us manage the extended payments.* They also put our practice on a payment plan to cover the lab

fees, which helped us absorb those costs.

- They shared historical data revealing that if patients were going to default on their payments, they were most likely to do so in the first few months of treatment, not during the post-treatment time frame. Going forward, we decided to hedge our bets by maintaining a year-long retention phase for Invisalign patients. That way, patients feel like they are still under our care, even though their treatment phase was complete.

Change #2: Expanding the Invisalign patient base

Q. Now that you have evolved to being a primarily Invisalign practice, how has your patient base changed?

A. Prior to our participation in the ADAPT program, the majority of our Invisalign patients were adults; these were the patients who came asking for Invisalign treatment. This changed when the communications experts identified the opportunity in our practice to modify how we were presenting treatment options to our patients. Today we have a mix of

Invisalign patients that includes teens, parents and other adults.

Q. How do you present Invisalign treatment to your patients?

A. We don't push a particular modality unless there is a clinical reason to do so. I believe patients are happier if they feel they've had a hand in making the choice. Instead, I explain how we need to move the teeth, then tell them we can achieve the outcome with either braces or aligners. I typically

leave the conversation that follows to my treatment coordinator. She explains the differences between Invisalign treatment and braces treatment, and covers what the patient will need to do day-to-day in each modality. She then encourages them to pick the treatment that best fits their lives. By the time patients learn they can brush and floss better, eat whatever they want and complete their treatment with fewer visits, most of them choose aligners.

*As part of the ADAPT program, Dr. Swan was eligible for a payment terms program that allowed flexibility with Invisalign lab fees and cashflow.

Change #3: Reinventing patient visits

Q. One of the opportunities the ADAPT consultants identified was to streamline new patient consults. How did this help your practice run more efficiently?

A. One of the most significant insights I've taken away from the advent of direct-to-consumer aligners is that there are many, many people out there who want orthodontic treatment but aren't tapped into the dental field. It doesn't mean they don't need treatment or that they won't get it, but they have no idea what treatment will cost or what's involved. Before they can consider becoming patients, they need a lot of basic information and guidance, and they typically need time to process that information before they're ready to move ahead with treatment.

While these would-be patients represent a significant opportunity for practices like mine, filling my schedule with new patient consults with individuals who are still in shopping mode can be counterproductive. On the recommendation of Align®, we moved to offering what we call virtual express consults.

When a prospective patient contacts us, the receptionist evaluates where the

individual is in the decision process. If he or she is just looking for basic information, we schedule an express consult, which is conducted via video chat. We can usually determine through these chats whether patients need limited or comprehensive treatment and can tailor the information we provide, including ballpark costs. Previously this kind of appointment would have taken up to an hour in the office, so this approach saves precious time for both staff and for prospective patients.

Because most of these patients are looking for cost information, we use the virtual express consults to talk to them about insurance and payment options. I have found that many young people have a limited understanding of insurance and options like health savings accounts, so this discussion can be very helpful in their decision and planning process. While many of these individuals aren't ready to initiate treatment right away, with the information we provide them, we can move them a step closer to becoming patients, particularly if it's a matter of their budgeting for treatment. Once they're ready, we bring them in to the office to determine whether they are good candidates for Invisalign treatment.

Q. You've also changed how you schedule Invisalign appointments.

A. The ADAPT team highlighted that the idea of fewer office visits is a key selling point for Invisalign patients. Knowing this, we explored ways to capitalize on this insight. Previously I saw my aligner patients every 12 weeks; now it's every 20 weeks. To ensure patients are progressing as they should, we've incorporated weekly patient check-ins via virtual care visits that utilize a remote monitoring service to enable Invisalign patients to scan their teeth with a cellphone camera. Through the program, we analyze the scans and let patients know if their treatment is on track and they can go to the next aligner or if they need to wear the same aligner for additional days to get the needed movement.

With virtual care visits, we've greatly increased patient satisfaction without sacrificing the level of monitoring and care our Invisalign patients receive. If anything, we're able to catch problems sooner. Prior to this change, 12 weeks could elapse before I was able to determine if a patient was compliant. With weekly monitoring, I can catch – and address – these problems within a couple of weeks.

Results

Q. How have the changes you've implemented through the ADAPT program affected your practice growth and your practice environment?

A. When I look at the numbers from before the ADAPT program and compare them to one year after, we've clearly had strong year-over-year growth – and we're still growing. Over a span of just 11 months, our new patient numbers increased by 44.6%, and our gross collections and gross production were also up. We've even been expanding the target areas for our marketing activities because we're getting more patients from further distances. When patients only need to schedule office visits every 20 weeks, we've found that it's not that big of a deal for them to drive to our office from the other side of town.

At the same time, our workdays are less hectic because we have fewer appointments and the appointments

themselves are less stressful. During the slower part of the day, I can focus on my ClinCheck® treatment plans. Invisalign patients are generally happier and aren't constantly asking, "When am I done? When am I done?" Meanwhile, repair visits have dropped by 20.6% and we have a lot fewer emergencies.

An insight I've had about teen patients is that, contrary to what I might have expected, they actually tend to be very compliant with Invisalign treatment. While adults make a number of excuses for not wearing their aligners (e.g., "I have a presentation at work/a dinner/a wedding"), the kids I'm treating take to wearing aligners quite easily – without making excuses. Meanwhile, busy teens and their parents really enjoy the convenience of having fewer appointments with Invisalign treatment, thanks to no emergency appointments from broken wires or brackets.



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Results (cont.)

Q. The ADAPT team invested a great deal of time analyzing the role of your staff members and working with them on work processes. How has that paid off?

A. We've undergone a number of changes in how we operate day-to-day, and programs like virtual care visits and express consult have created new responsibilities for my staff members. The ADAPT team helped my staff members navigate the new processes and provided training to help them get comfortable with their responsibilities.

At the same time, I felt it was important to involve my team in determining what these processes ultimately would look like.

Everybody in the practice now has patient care responsibilities, which has resulted in a more equitable distribution of workload and given everyone ownership in our success.

Q. What would you tell other doctors considering participation in the ADAPT program?

A. I admit that I was a bit of an Invisalign skeptic for a long time. I was in practice for eight years before I made the decision to get certified as an Invisalign provider, and it wasn't until I participated in this program that I made the transition to treating a majority of my patients with clear aligners. What I learned through the program is that Align® has really sharp people with experience in areas that, as an orthodontist, I simply don't have. I was also pleased to find out how much they wanted me to succeed.

As specialists ourselves, I think orthodontists should welcome the opportunity to work with specialists in other aspects of practice management. I don't have the time to get an MBA or a finance degree myself, but I've been able to reap the benefits of working with experts who do.



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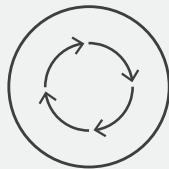
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Results displayed below describe Dr. Swan's individual practice experience



+11.9%

Collections



+16.4%

Gross production



+3.1%

Adj. conversion rate



+36.4%

Invisalign SOC %



+44.6%

New patients added



-4.0%

Occupancy expenses*



-20.6%

Repair visits



-10.4%

Business management expenses*

*As part of the ADAPT program, Dr. Swan was eligible for a payment terms program that allowed flexibility with Invisalign lab fees and cash flow.

Experiences, results, and opinions in this article are those of the doctor in her orthodontic practice and not necessarily of Align Technology, Inc. The doctor was paid an honorarium by Align Technology, Inc. for her time to develop this article.

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