

Present Contact Lenses and Lens Care Solution as a Package

Several years ago, **Kerry Pearson, OD**, who has three LensCrafters-affiliated locations in the Phoenix area, climbed aboard the one-day or one-month replacement schedule for soft contact lens wearers. "The compliance piece is so important from the standpoint of getting people to maintain good ocular health," he says. "The one-day or one-month replacement schedule seems easier to remember."



Dr. Pearson

But there's another component to compliance, Dr. Pearson says, and that's making sure that patients are using the contact lens solutions that

are best able to keep their contact lenses clean and feeling comfortable. "Today, we're fitting so many silicone hydrogel contact lenses, and sometimes patients have low-level reactions to the multipurpose solution they're using. It's not always obvious to them that the solution is the problem," he says. As a result, he has become more proactive in recommending a package: specific contact lenses and a specific solution. "I remind patients that they need to be consistent in the contact lens solutions they use, and if they have irritations or comfort issues

and have switched to a different solution, that may be contributing to the discomfort."

Here are some steps the practice has taken to promote compliance.

◆ **Know your products:** "We switched to OPTI-FREE® PureMoist® Multi-Purpose Disinfecting Solution almost exclusively," Dr. Pearson says. "We did a test survey in each of our three offices and had such a good response from our patients." The preferred combination in the practice now is a monthly replacement silicone hydrogel lens, usually an AIR OPTIX® brand lens. If there's any sensitivity with the solution, the practice doctors and staff recommend CLEAR CARE® cleaning and disinfection solution.

◆ **Be direct and precise in instructions:** Not only does the practice need to identify its preferred products, but doctors and staff should articulate those reasons to the patient. With new contact lens wearers, Dr. Pearson makes sure that patients understand that he's prescribing silicone hydrogel lenses because of their high level of oxygen transmissibility and

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Doctor Finds Motivation at ALLDocs Meeting

Kevin Snipes, OD, was pleased that the timing worked out so that he could attend his third ALLDocs annual meeting this year. A LensCrafters leaseholder in Louisville, Ky., since 1996, Dr. Snipes just acquired a second office in town last year. These meetings provide a valuable experience. "You pick up so much information," he says.

While a key draw for these meetings is the wonderful resort and location, the education and presentations motivate Dr. Snipes to consider the future of his own practice. "As always, the speakers were incredible," he says. He's already started planning and preparing for two upcoming office changes.

First, the presentation *Fact or Fiction and the Eye* with **Larry Alexander, OD**, left a lasting impression on Dr. Snipes. Dr. Alexander, senior director of clinical education for Optovue, spoke on the benefits of adding an optical coherence tomography (OCT) unit to a

practice. "Dr. Alexander's lecture made me question how I can practice any longer without an OCT," Dr. Snipes says. "I really feel the need to incorporate this instrumentation in my practice."

Craig Thomas, OD, discussed medical records of today and the future in *It's Time—Step up to Computerization*

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Auction Winner

Dr. Richard Winnick, of Denver, won the autographed Jim Craig jersey at the ALLDocs annual meeting. He is surrounded by the ALLDocs board, (l-r): Dr. Jack McIntyre, Dr. Kerry Gelb, Dr. Bill Fox, Dr. Richard Hults, Dr. Steve Lutz and Dr. Dale Stein.



Package Presentation

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that he's recommending his preferred solutions, OPTI-FREE® PureMoist® MPDS or CLEAR CARE® cleaning and disinfecting solution, because these will help keep their lenses feeling comfortable for all-day wear. "When we make that connection, it seems to have an effect," he says.

◆ **Ask questions:** Dr. Pearson asks contact lens patients how long they wore the last pair of contact lenses they put in. "Patients often wear their last pair too long," he says. Similarly, ask patients exactly what brand of contact lens care solution they're using. By engaging patients in the conversation

about their contact lens-wearing habits, Dr. Pearson can tailor the conversation to their needs. Don't skip this conversation with returning contact lens patients, he says. Many of them have fallen into bad habits, such as switching solutions, topping off solutions or overwearing their contact lenses.

◆ **Assume an annual supply sale:** At checkout, patients are presented the annual supply pricing first. The costs have been calculated to show patients what the balance is after insurance. There's less conversation about buying only a certain number of boxes, a conversation that Dr. Pearson thinks is futile. "No one opts for half an x-ray. With any other medical provider, you're told, 'Here's

the bill. Here's the insurance coverage, and here's your balance due.' In that way, insurance has made the conversation much easier," he says. Dr. Pearson wants to make sure patients walk out of the office with an annual supply of contact lenses, a starter kit of the optimal solution and the knowledge that they need to be back the following year for another comprehensive exam. ■



Make the connection between lens care and lens comfort.

See product instructions for complete wear, care and safety information.



FROM THE PRESIDENT'S DESK

A Guide for the Year Ahead

Come away from every ALLDocs annual meeting energized and determined to improve the quality of care and the services I provide to my patients. I also find new inspiration to live better—and I'm grateful that many of you have let your ALLDocs board members know that you derive similar benefits.

It was a true delight to hear Olympic Gold medalist **Jim Craig** deliver his motivational, high-energy presentation. His athletic achievement served as a great reminder that we, too, can



(l-r): Olympic Gold Medal winner and motivational speaker Jim Craig with Dr. Kerry Gelb

achieve impressive results by doing and being our best.

We are indebted to the CE speakers who delivered inspiring, informative and practical presentations. As a result of their participation, ALLDocs members are better prepared to hire the best employees; understand the meaning behind meaningful use; move into specialty lens fittings such as CRT and scleral contact lenses; and feel more confident about issues such

as sport vision, glaucoma diagnosis and management, new technology and neuro-optometry. A special thanks to all of them: **Daniel Abramson; Larry Alexander, OD; Daniel Amen, MD; Nick Despotidis, OD; David Greenfield, MD; Larry Lampert, OD, FCOVD; ALLDocs' own Steve Lutz, OD; and Craig Thomas, OD.**

For those who were not able to attend the meeting, you can catch up on meeting highlights and presentations on alldocsod.com. I hope that all ALLDocs members will be doubly motivated to attend next year's meeting.

Kerry Gelb, OD
drkmg@comcast.net

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COOPERVISION GUEST COLUMN

Trust-Based Selling



By Tim Roberts

Selling can be an ugly word for most ODs and many key staff people charged with that responsibility. While being nice is important in developing a patient-doctor relationship, it's pure folly to assume that it will guarantee a high capture rate.

In my ongoing work with practices across the country, a fourfold message remains constant: Set what I call an *Upfront Contract*, or ground rules, in the exam lane; prescribe, don't recommend; stay curious; and have powerful beliefs about the difference between price and value.

Your patients know you're the expert and want you to weigh in. When they believe that you care about them first and foremost, trust begins to build. At the onset of each exam, explain what will take place. You might say, *"Mrs. Smith, we're going to be together about 25 minutes this morning. In that time I will have questions for you, you're going to have questions for me, and a typical outcome will be that I'm going to prescribe a specific*

course of action. As your doctor, I'll be counting on you to follow what I prescribe. Does that make sense? Would that be fair?"

During your time—and later, your staff's time—with the patient, avoid mutual mystification. That means don't assume that you know what the patient just said. Break through the verbal codes, filters and patterns. For example, follow up a patient's comment with your own question. *"You told me that for a reason. Is there something else?"* Then listen.

Perception can become reality. If you or your staff believes that what you charge is expensive, your business plan is hostage to that self-limiting belief. That's a classic example of where practices are vulnerable. You've earned the right to prescribe. You've earned the right to be valuable and act valuable. Don't let your patients' beliefs about expense suggest that you're overpriced.

Remember, as a doctor thinketh, so shall he become. ■

Tim Roberts is the principal and founder of Trustpointe, an Indianapolis-based franchise of Sandler Training. He can be reached at 317.845.0041 or tim@thetrustpointe.com.

Doctor Finds Motivation

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and Electronic Medical Records. Dr. Snipes appreciated the information Dr. Thomas shared about the implementation of electronic health records (EHR). "The details, knowledge and information he shared was very important, and it certainly makes me want to get rolling with EHR soon."

The keynote presentation by motivational speaker **Jim Craig** was "phenomenal, and it was an incredible opportunity to listen to him speak," Dr. Snipes says.

Outside of the conference, Dr. Snipes encourages colleagues to take advantage of all the other activities and events planned for doctors who attend the meeting. "Don't feel intimidated to join in on the golf outing. As bad a golfer as I am, I had a great time." ■

Boca Raton Meeting Gallery



A: ALLDocs members Dr. Frank Verdone, Dr. Lynne Roy, Dr. Michael Steck, Dr. Maria Steck and Dr. Phillip Roy



B: Dinner and an evening of fun cruising the Intra-coastal Waterway



C: In a CE session, front row (l-r): Dr. Kerry Gelb, Dr. Jeff Case, Dr. Tim Kenkel and Dr. John Magalhaes

IMPLEMENTING THE TOTAL PATIENT CARE MODEL

Be the Gateway, Not the Obstacle

Contact lens dropouts are significant and profound, but largely preventable



Dr. Rumpakis

By John Rumpakis, OD, MBA,
Practice Resource Management

There's a kind of urban legend that the dropout rate among contact lens patients is roughly 10 percent. But I've been conducting a large-scale study, the Global Contact Lens Annuity Study, to define the value of the contact lens patient, and I calculate the average dropout rate to be 16 percent—or 60 percent higher than many ODs think it is¹. That's significant.

The economic impact is profound. The average annual revenue per contact lens patient is \$275, but taken over his or her lifetime, the value of a contact lens patient to a U.S. practice can be nearly \$24,000¹. That's profound.

Here's the good news: it's largely preventable. Fifty percent of U.S. patients drop out of contact lenses because of comfort issues¹—and doctors play an enormously important role in keeping patients comfortable. You can be the gateway to greater comfort or the obstacle to it. Often, the obstacle arises from not paying enough attention to the patients' complaints, compliance or underlying issues. Optometrists tend to focus more on the "what" rather than on the "why" in their patient communications—a doctor-oriented perspective rather than a patient-oriented one. Tell patients what you are recommending and why it is of benefit to them.

Here are three key principles to help develop your practice as a gateway to greater comfort.

1. Ask the right questions. Be specific in asking patients about their contact lens likes, dislikes and habits. These questions should be part of every conversation with every contact lens wearer.

- ◆ What are you using to take care of your lenses? *Have patients identify the bottle of lens care solution.*
- ◆ Do your contact lenses limit what you like to do?
- ◆ Are your contact lenses a hassle?
- ◆ If you could change anything about your

contact lenses, what would it be?

- ◆ Are you able to wear your lenses for a full day with complete comfort? Contact lens discomfort is not normal.

2. Communicate your role. Each person within the practice has a role to play in the patient's success. So defining those roles is critical, which also means that internal education should be a priority. Define measurable outcomes to affect change, and develop a common, easy-to-understand set of goals. Address the what's-in-it-for-me issue proactively rather than reactively.

Contact Lens Dropouts

Significant: The average calculated contact lens dropout rate is 16 percent¹.

Profound: In the U.S. market, the value of a single contact lens patient over his or her lifetime to a practice can be nearly \$24,000¹.

Preventable: The top reason patients drop out of contact lens wear is discomfort¹; discomfort is preventable through doctors' proactive recommendations. ■

3. Listen with your eyes and ears. Make sure your staff understands that the identification of patient wants and needs is most appropriately made by the eye care team. You—not the patients—are the experts. A patient-focused explanation of why you are making a recommendation will help patients feel that any change to their initial expectation was their idea.

Strategies to Retain Contact Lens Patients

These strategies can serve as a foundation for a contact lens practice to ensure the best chance of retaining its contact lens patients.

- ◆ Refit previous contact lens wearers with latest-technology lenses.
- ◆ Proactively prescribe a specific lens care system to complement the lenses—think of it as a system, not isolated components.
- ◆ Reinforce lens wear and care instructions at every follow-up visit.
- ◆ Practice full-scope eye care by diagnosing and treating allergy issues and any underlying ocular surface disease issues.
- ◆ Embrace the total patient care model. Remember that a strong refractive practice is not mutually exclusive to providing medical eye care. ■

¹Rumpakis J. New data on contact lens dropouts: an international perspective. *Rev Optometry*. 2010;4:47-57.