

Building an Integration Plan: Your Guide to Retaining Patients and Staff

Congratulations! You have found the right person or practice for your transition goals.

Now it's time to build an integration plan that ensures the practice keeps running smoothly throughout and long after the transition.

Think of your integration plan as a treatment plan. You wouldn't walk into a treatment room without doing the necessary preparation. Likewise, following a similar process for your integration plan will give you a head start on retaining the patients and staff that are critical to a successful practice.

Just like every treatment plan is unique to the patient, each integration plan will be unique to the practice and doctors. Not every item will apply, and you'll likely identify some that aren't listed. Rather, use this as a guide to get started.

Whether the practice is changing hands or growing, work together and communicate frequently to make sure patients and staff are cared for at every step.



Step 1: Conduct Discovery

2+ months before official start date

As soon as you reach an agreement, begin evaluating the situation. Ask lots of questions to identify what applies to this particular integration. For example:

- Is the new doctor licensed in this state?
- Will they need to be credentialed with new payers?
- Which office systems are in use? (Dentrix, dental EMR, billing, collections, ordering)
- How can we prepare staff for the transition? (especially a sale)
- Will we need additional staff to support the new doctor? (especially for an associate)
- Are there any staff members who may be more likely to retire with the owner?
- Who will need to be notified? (patients, payers, landlords, local specialists, etc)
- Who will treat which patients? What about patients mid-way through treatment?
- Will the incoming doctor need to recruit their own patients? If so, is there a budget for this, either in time away from the office or marketing materials?

If possible, the incoming doctor should begin shadowing in the practice to understand how the office works, both in and out of the operatories.

Tell Staff Sooner Rather Than Later




You want staff on your side throughout the transition. After all, they hold the keys to many patient relationships and have a vital role in how smoothly the office runs.

And if you're nearing retirement age, your staff and patients will likely *not* be surprised.

Talk to your staff about your plans, ideally long before you begin the search process. Involving staff in interviews can ensure that they will be comfortable working with this new person.

Some doctors worry that telling staff before a transition will encourage them to leave the practice. However, the opposite is often true: when staff are blindsided by a major change (especially a sale), they may feel unvalued, abandoned, or betrayed by their longtime employer. Those feelings can propel them to act out or leave.

 – *One hygienist learned about a pending sale when she spotted the final documents on the office copier. Crying, she immediately told the rest of the staff — who proceeded to tell patients things like, “We didn’t know until the last second.” The buyer struggled to overcome this rocky beginning with staff and patients.*

– *A front desk staff member was so upset that she wasn’t notified about a sale that she never gave the new owner a chance. Instead, she quit and posted negative reviews online.*

When staff have been involved in the transition, they feel invested — and will help the practice and new doctor succeed.

Step 2: Create the Problem List

2+ months before official start date

Next, translate everything you identified during the Discovery phase into specific problems that require well-thought-out solutions. For example:

- Incoming doctor not licensed in the state
- Office manager considers herself *the* key employee and may be excessively upset at the thought of a new employer
- Front desk duties have been performed by a spouse (who may also be retiring)
- Buyer not familiar with the office software
- Office accepts Medicaid, and the buyer is not credentialed



Start Credentialing ASAP

Remember, the new doctor can't see patients or get paid until they complete the credentialing process. This can take 90+ days, depending on which payers are involved.

Consider using the [ADA's credentialing service](#) (free to members). Follow up frequently to ensure the process is still moving along.

- ⚠ Note that since credentialing requires agencies to obtain documentation from the office, it is best to inform key staff of the pending transition *before* beginning the process. **You don't want staff to find out this way!** Otherwise, provide your personal cell number to each company representative to be sure the requests for information come directly to you.
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Step 3: Prioritize

6-8 weeks before official start date

Now sort your problem list by priority. Some (such as credentialing and licensure) will take time and effort yet are essential steps. After all, the new dentist in the office wants to get paid from day one! Others, like notifying local specialists, can come later.

In general, prioritize items that affect:

- The new doctor's ability to treat patients on day one
- Getting paid in a timely manner
- Patient and staff retention
- Continuity of treatment

Now is the time to create the plan for each item and designate who should take the lead. For example:

- Start licensure process (*incoming doctor*)
- Get software training (*incoming doctor*)
- Define how and when to communicate the change to staff (*both*)
- Determine if additional staff are needed. If so, create job descriptions and begin screening applicants (*both*)
- Begin Medicaid credentialing process (*incoming doctor, ideally with assistance from staff*)
- Draft notification letters to patients, payers, others (*senior doctor, with input from incoming*)
- Review charts of current patients to ensure continuity of care (*both*)

Step 4: Execute

1 month before official start date

The incoming doctor should continue to spend time in the office — ideally, several days. Interview each staff member one-on-one to review roles, ask for input about how the practice runs, and get to know each other.

Meanwhile, both doctors should work together to confirm progress and address any issues that have arisen. Make sure you are taking time to:

- Review upcoming treatment plans
- Finalize the senior doctor's letter of introduction and social media/website updates
- Order supplies
- Ensure the new doctor understands current systems and processes
- Craft scripts for how staff will communicate the changes to patients
- Set goals for the first week, month, and quarter
- Ensure contracts and/or financing are on track

Step 5: Double Check Your Work

1 week before official start date

You're almost there! This week should be a dry run for the actual change.

- Review treatment plans as a full team so you're all prepared to work together with the first week's patients
- Send out retirement/introduction letter to all patients and post the information on the practice's website and/or social media channels
- Call each patient scheduled to see the new doctor so they're not surprised
- Establish a schedule for the first week/month, such as a team meeting at the end of the first week or an extended morning huddle on the first day



Introducing the New Doctor: Letter and Scripts

How you communicate with patients sets the tone for everything that comes next. The senior doctor should draft a letter that explains:

- Why the practice is bringing in a new doctor (growth, planning for retirement, etc)
- Why the practice is bringing in this new doctor (credentials, experience, "perfect fit for the practice," etc)
- What will change (additional availability, hours, new treatments)
- What won't change (dedication to patients and community, staff)

The incoming doctor should review the draft to add details and confirm accuracy. Then, translate this language into updates for the website/social media channels. Write scripts for staff to use with patients.

Finally, communicate, communicate, communicate. You don't want to surprise patients when the new doctor walks into the operatory to treat them. Ideally, the senior doctor should make the introductions. In fact, in the case of a sale, most lenders require that the senior doctor make the introduction to the patients.

Step 6: Start Strong

You've made it!

Start the day with an energetic team meeting that sets an enthusiastic tone. Answer questions and troubleshoot any potential challenges. Bring in breakfast, a special lunch, flowers, or something celebratory.



Step 7: Continue to Improve

Your transition doesn't end on the first day. Rather, continue to work as a team to navigate any issues or questions that may arise.

- Set a team meeting after the first week to discuss how things went
- Focus on patient care and get staff input on any challenges
- Remind the team that your door is always open
- Do something as a team outside the office: happy hour, something fun, etc.

Over the coming weeks and months, continue to monitor the practice's condition. Look for (and celebrate) strengths while identifying weaknesses. Check in frequently with your team to improve how you work together and care for patients.



About ADA Practice Transitions

ADA Practice Transitions (ADAPT) can help you with every phase of your practice transition. Whether you're buying or selling a practice, hiring an associate, or looking for a job, ADAPT can help match you with your ideal situation, then give you the tools and resources you need for long-term success.

[ADAPracticeTransitions.com](https://www.adapracticetransitions.com)

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A Sample Integration Plan

Dr. Alice's practice is growing! She is finishing a renovation that will add two operatories to her busy practice. She worked with ADA Practice Transitions to find the perfect associate for her practice: Dr. Kristine. The two have come to an agreement and are working through the contract terms. Dr. Kristine is relocating from out of state and will start her new job in two months. She met the staff during the interview process, and they're all excited about the new hire.



Conduct Discovery

STEP

1

Right after the two doctors come to an agreement, they meet via Zoom to identify what might need solving, asking:

- Is Dr. Kristine licensed in the state?
- Will she need to be credentialed with the office's payers?
- Which office systems are in use? Will they need updates? Is Dr. Kristine familiar with them?
- Will the practice need additional staff to support Dr. Kristine?
- Who will need to be notified? (patients, payers, local specialists, etc.)
- Who will treat which patients? What about patients mid-way through a treatment?
- Does the practice have enough patients to support two full-time doctors?
- If Dr. Kristine has to recruit her own patients, how will the practice support that?
- Do they both have lawyers who can review/advise on the associate contract?

Create the Problem List

STEP

2

Next, the pair translates their discussion into a list of solvable problems.

- Dr. Kristine is not licensed in the state
- Dr. Kristine will need to be credentialed with Medicaid
- Dr. Kristine has not used the office software before
- The practice will need another hygienist and assistant to support Dr. Kristine
- Patients will need to be notified, as will the endodontist and other specialists
- Though the practice has been growing, they will need more patients to keep Dr. Kristine busy
- The new operatories are not yet fully equipped
- Dr. Kristine will need to spend time in the practice ahead of her start date
- The official associate contract still needs to be finalized

Prioritize

STEP

3

Once they have a list, they put the most important items at the top, then assign responsibility for each.

- Start licensure process (*Dr. Kristine*)
- Begin Medicaid credentialing process (*Dr. Kristine, with assistance from office manager*)
- Work with lawyers to finalize contract ahead of start date (*both*)
- Schedule flights/book accommodations to shadow before start date (*Dr. Kristine*)
- Create job descriptions for hygienist and assistant; begin screening applicants (*both*)
- Identify needed equipment/supplies for new operatories (*Dr. Alice*), then work together to determine Dr. Kristine's preferences
- Review charts of current patients to ensure continuity of care (*both*)
- Get software training (*office manager to help Dr. Kristine*)
- Develop plan to attract new patients (*both*)
- Draft notification letters to patients, specialists (*Dr. Alice*)



Execute

STEP

4

Dr. Kristine spends three days in the practice one month before her start date. She shadows Dr. Alice and the staff and asks questions. Every day, the two doctors meet to work through their to-do list. Specifically, they:

- Review upcoming treatment plans
- Finalize Dr. Alice's letter of introduction and social media/website updates
- Order equipment and supplies for the new operatories
- Talk through the current systems and processes
- Craft scripts for how staff will communicate the changes to patients
- Set goals for the first week, month, and quarter
- Work with their lawyers to finalize the associate contract
- Ensure Dr. Kristine talks to each staff member one-on-one to begin getting to know them



Double Check

STEP

5

The week prior to Dr. Kristine's first day, she stops by the practice for a few short meetings. During this time, the two doctors:

- Review the first week's treatment plans with the full team to ensure seamless care delivery
- Mail the letter of introduction to all patients and post the details and a photo on the practice's website and Facebook page
- Ensure all of next week's patients who will see Dr. Kristine receive a phone call from the front desk staff
- Schedule an extended team huddle for the first day and a team meeting for the end of the first week



Start Strong

STEP

6

Dr. Alice and Dr. Kristine set the tone for Dr. Kristine's first day:

- Dr. Kristine brings in breakfast for the staff
- During the extended team huddle, Dr. Alice sets an upbeat, excited tone while reminding staff to introduce Dr. Kristine
- Throughout the day, Dr. Alice pops into each of Dr. Kristine's appointments for a personal hand-off.



Continue to Improve

STEP

7

After Dr. Kristine's first week, the office closes early on Friday afternoon for a team meeting. The entire team talks about what went well and brainstorms a couple small changes that should streamline processes. Then the whole team heads to an escape room.

- Over the coming weeks, they check in frequently with each other and continue to make small adjustments. Dr. Alice brings Dr. Kristine to her component's monthly lunch and introduces her to the specialists they work with.



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