

Private Pay Pitch Transcript

Uriah: Hello, everyone, and welcome to module three - Private Pay Pitch. Hi Tracel, how're you doing?

Tracel: I'm doing well. How are you?

Uriah: I'm doing good. This is something I'm definitely kind of excited to talk about. I know a lot of people are interested. And I was thinking this morning that, of course, this applies to a private-pay only practice and then also applies to a hybrid practice where they do some insurance, some private-pay. But I actually kind of think that the concepts and the principles we're going to talk about would also apply to an insurance-based practice. Tell me what you think about this because people still have choice to go from one insurance-based practice to another, and so I think some of the tips that are in here could help an insurance-based practice bring in more clients as well. Do you think?

Tracel: I hadn't thought about that, but that makes perfect sense because you still want to show why your practice is the place people should be, and so I think there is a lot of really helpful information. And even just in your phone technique, and I think you could use some of the selling techniques just in other calls that you're having. So I think there's a lot of really valuable information and a lot of different ways here.

Uriah: Good customer service skills apply everywhere.

Tracel: Absolutely, yes.

Uriah: And we'll probably do another training specifically on those soft skills. I think that would be good one.

Tracel: I do too.

Uriah: Okay, so this one is Private Pay Pitch and we're going to share with you a number of different things. Just trying to...there we go. So our overall goal is...your goal, rather, is you want to help potential clients make an informed decision and hopefully choose to work with the best therapist, even if that means paying out of pocket. And this is definitely not about hard sales pitch. None of us are ever going to do that. It's not appropriate. It's really just about being helpful, sharing good information and being a compassionate guide. And that's honestly what most people are looking for.

Tracel: I wish there was another way, another word besides 'sales', because that has a bad connotation to a lot of people.

Uriah: Right.

Tracel: So, I mean, if you could get that word out of your mind and just think about you're really showing the benefits of your practice and showing that in a great way, that's appealing to who you're speaking to on the phone, and then you get them to convert to sales. Yeah, I mean, I don't know what else to use, but... *(laughs)*

Uriah: I think the stigma or the connotation behind 'sales' is that somebody with less than good intentions is trying to convince you against your will to buy something that you don't really need and is not right for you.

Tracel: That gross car salesman comes to mind, right? *(Laughs)*

Uriah: Actually the last time I bought a car, which was only a couple of months ago, I really seriously considered going to Carmax-

Tracel: Right.

Uriah: Because their whole concept is the sticker price IS the price. It's a no-haggle kind of situation.

Tracel: Right.

Uriah: Now that's-

Tracel: Saturn was like that too. Saturn was like that too.

Uriah: Really?

Tracel: They don't exist anymore, but yeah, I had a couple of Saturns, that was really fantastic.

Uriah: Oh, that's great, that's great. So people really do just want to get help and they appreciate having somebody to guide them to the right option for them, whatever that is, right?

Tracel: Right.

Uriah: So some of the main points we're going to talk about, I'll pop over to the next slide just to give you the headlines here. Number one, we're going to talk about how to share the benefits of choosing this particular practice, this particular therapist. We're also going to get into a little bit about using positive reinforcement and affirmation. And then number three, talking about stating the fee confidently and clearly. That's a big part of helping people make a decision to pay out of pocket.

Tracel: Right.

Uriah: So I think the reason why this is such a important topic and one that we get asked about a lot is because there has been over time sort of a movement of therapists going away from insurance companies and taking insurance. And anybody listening to this probably has some sort of idea about this. But essentially, it's kind of a broken system and we won't get into that. But the insurance companies, by and large, don't reimburse the therapists at a very good rate at all. And there's all kinds of other complications with getting paid and getting services approved. So there's...I don't want to say, like, a 'new generation of therapists' necessarily. But there's a lot of practices now that are focusing solely on only doing private-pay and helping people with out of network benefits, and we'll talk about that. So that's kind of a trend, I guess, over the last maybe five to ten years or so, and those practices who only who don't take insurance and who only take private-pay generally have to do better marketing, better customer service, kind of just be better at all of those things, because "the consumer", the potential client has many more choices.

Tracel: Right.

Uriah: If I'm going to take my hundred dollars or my two hundred dollars and go find a therapist - which I honestly did a couple of months ago for one of my kiddos, and I was very discerning about which practice I went to, which therapist I chose. And I wanted the best therapist for the best price, basically.

Tracel: Mm-hmm.

Uriah: So the first one here is we're going to talk about how you can share the benefits of choosing this practice with this therapist when you're on the phone with that potential client, or even over email or text or whatever it might be. So these are a couple of different main points. I hesitate to call them 'selling points', right?

Tracel: Right.

Uriah: But...what else would you call that? I guess they're...

Tracel: They're the perks. Yeah. Advantages.

Uriah: The advantages. That's right.

Tracel: That's good, that's good.

Uriah: So in general, it always helps if the practice or the particular therapist has a specific area of specialization. So, for example, if you're on the phone with a potential client and they've got... I'll just use myself as an example. So, Tiffany, my VA, was on the phone with a potential client, and they have a 17 year old son and they're looking for therapy because he's got anger issues. Let's go with that. She can easily say - she's not obviously telling people about me anymore because I'm not the main therapist here that's working with clients. But she can say, "well, we've got Matthew." First of all, "this

practice"... you know, "you came to the right place because we specialize in working with adolescents." True.

Tracel: Right.

Uriah: Matthew has a ton of experience working with teenage boys. And in fact, he's certified as an anger management counselor. So there you've got a practice specialty and a therapist niche, if you will. And that is a lot more compelling than just being able to say, you know, the opposite of that, whatever that would be. We've got a therapist over here, Bob. No offense, Bob, but Bob's been a therapist for X number of years and he works with couples and adolescents, et cetera.

Tracel: Right. Because your whole job as the intake coordinator or whatever your role is titled is to show them why somebody is a good fit. You know, even if money's not an object, that's still what your role is.

Uriah: Sure.

Tracel: And so you're just taking this a little bit further and maybe thinking about more specifics when you might be a little bit general for the most part. But now, I mean, if I had a son and I knew that this is the place where that's really all they see are adolescents, and then now you have this one specific person that you know is certified in what my exact problem is. I'm really going to think hard about that, about is it worth it that I use my insurance or get who I think is going to be perfect for for my child?

Uriah: So true. People are not always looking for specialists, but in general, it is very, very helpful. I'm thinking about just this week, actually, I had to call a company for a drywall repair because I won't tell you the whole story because it's kind of embarrassing. But I had to put a hole in my wall because of a plumbing issue, and so there's this giant hole in my bathroom wall. And I looked up on Yelp 'drywall repair' and most of the companies were all like painters. And I was like, well, you know, I assume that a good painter could patch drywall.

Tracel: Right.

Uriah: But then I came across this one company called Patches In A Day.

Tracel: *(laughs)*

Uriah: Right? How great is that?

Tracel: So great to you.

Uriah: So great. And so all they do is patch drywall all day long, every day. So I called them. And, you know, it's funny, it's kind of interesting because they actually have a

waiting list and they're like, "well, we can".. now as we're talking, this is September - "we can't get to you until October."

Tracel: Oh!

Uriah: But I ended up going with them because guess what - they do that, and they do good work in this specific area.

Tracel: Right.

Uriah: So in the case of a private-pay practice where it is more of a generalist practice, what you would want ideally is particular therapists who have specializations. So if the practice works with families of all types, but this family has an eating disorder kid...a kid with an eating disorder, it's going to be ideal if you have one therapist or multiple therapists in that practice that do that. So that's pretty key. If you don't have that, it's just a little bit harder to convey why they should choose that practice. The next one on our list here is a Convenient Location. People usually look for therapists that are pretty close to them unless there's a very specific specialty that they're willing to drive for or travel for. Obviously now with Covid-19, people are even more able to pick the therapist that's right for them, regardless of location. But I've found and we've found that people usually choose a therapist about 10 to 20 miles around their house because you just don't want to drive further than that; it's inconvenient. And then in some situations, like if you work for a practice that has... I'm just thinking, like, you know, offices in downtown San Francisco or in a major city, Chicago or wherever else, if you're in the financial district and you're trying to reach clients in the financial district, guess what? We're right down the street.

Tracel: Right.

Uriah: Good location. And usually that's not something you usually mention on the phone necessarily, but people will just be able to see that info on the website. I don't think there's anything else to say about that one, but it helps, right?

Tracel: Right. Because sometimes pre-Covid you were having people that might need to pop in during a lunch hour or something. So location's super important.

Uriah: True. Yeah, years and years ago, I accidentally - fortunately - set up my practice in an area of this city, the biggest city in my county, and also sort of a wealthy part of the city. So to be honest, I've had more luck with getting more private-pay clients because of the location.

Tracel: The location, mm-hmm.

Uriah: I had friends who set up offices in other cities that were just a different sort of socioeconomic, you know, kind of area. And it was not as easy. So that does matter a whole lot. But usually for most of us, we are where we are and we're not going to move

just for that. But if there's benefits to the location where the practice is located, you know, share that. Definitely share that.

Tracel: Right.

Uriah: We're really close to...you know, In N Out always builds there. Sorry for anybody who's not in California or close!

Tracel: *(laughs)*

Uriah: In N Out is a popular burger chain, right? But they always build their locations without fail next to a freeway.

Tracel: That's so true!

Uriah: Yeah. People see the big sign and the palm tree and they're like, oh, I need a burger.

Tracel: You're right! We have a couple here and that's exactly right. They are.

Uriah: Location, location, location.

Tracel: Mm-hmm.

Uriah: So Specialization, Convenient Location, Convenient Times. So if the practice has therapists who have availability on the nights or the weekend or sometimes the mornings, that can make a big difference. For us, working with kids, teenagers, you know, after school and evening appointments have always been a high priority. So that's going to help. That's going to help with conversion, right?

Tracel: Right.

Uriah: Because if the practice doesn't have availability in the days and times where that client needs to be, then it's probably not going to work out.

Tracel: Right.

Uriah: We actually opened up Saturdays a couple of years ago, I guess, and it ended up being pretty popular for the therapist that wanted to work on Saturday.

Tracel: Right.

Uriah: The weekend availability was huge, especially for like families that have kids in sports or, gosh, you know, everybody's just busy.

Tracel: Right.

Uriah: So, you know, I've heard of other practices having a lot of clients coming on Sundays. And that has worked well too.

Tracel: Yes.

Uriah: Go for a picnic, go for therapy, go to church and, you know, just get it all done and on a weekend day.

Tracel: (*laughs*) One day!

Uriah: So that's the kind of thing, honestly, that the practice can put on on the website as well as even on the outgoing voicemail. You can put it all kinds of in places just to let people know 'we're conveniently located here', 'we have a night and weekend availability', and that's just helpful for people to know for sure.

Tracel: Mm-hmm.

Uriah: As far as taking other forms of payment, it can often be helpful....some of the scenarios we're going to be talking about are if you're on the phone with somebody who wants to use their insurance and you're trying to help them make a decision to not use their insurance and choose an out-of-network therapist, if you - hopefully most practices do! - but if the practice takes credit cards, that's a big, big bonus. Part of my script is always and in our sample scripts is always mentioning that we take all forms of payment - we can take credit card, cash check. And then I usually always mention, like, health savings account cards because-

Tracel: Right.

Uriah: -some employers provide those for their employees. And if they, you know, if you have a health savings account card and you want to use it for therapy, but the practice doesn't take that, that would be inconvenient and would be a barrier to engaging services.

Tracel: Right, it's one simple thing that I have found that if you can mention that... people don't necessarily think about it right off because all they're thinking about is using their insurance. They're not connecting those two together. And so if you can say, you know, "we'll take your health savings account" and that often will change somebody's mind because they don't even think about using it that way.

Uriah: For sure. And there's been a bunch of studies on... psychological studies, on people spending habits and the use of credit cards. Mostly, most of the time it's a negative thing in the sense that, like, people are, you know, well, why would I remember reading this, that people spend 18 percent more at a fast food restaurant if they use credit versus cash?

Tracel: Wow.

Uriah: So obviously, we're not trying to get people to spend money that they don't have. That's not the goal here.

Tracel: Right, right.

Uriah: But if there's a genuine need for counseling and this is the therapist that's really going to help them the most and they can, kind of, use a credit card to pay for services for a little while so they can get the support. I mean, I'm definitely not against that. I would... you know, lots of people do that if they get a leak in the roof, if they...

Tracel: Right.

Uriah: ...have to replace their tires, I don't know what the situation would be. So taking credit cards and health savings accounts - super helpful. And super helpful to mention because you might not think about it. But if you mention that, then it gets people's wheels turning and think, "okay, well, yeah, that is kind of a lot of money, but maybe you could use the credit card and get some airline miles for it", something like that.

Tracel: Right (*laughs*).

Uriah: And then the next thing that could be helpful is setting up a one-to-one, one-on-one consult with the therapist directly. If you're on the phone with them and they're not sure or it's a particularly complex situation. I'm thinking about maybe a testing psychologist practice or somebody with an eating disorder. I'm try to think of other situations, but there are certain ones where that person is going to be able to make a better decision if they can talk to somebody with the clinical skills, right?

Tracel: Right.

Uriah: I think in our practice, most recently, it seems like we're doing... we don't do this on a regular basis because I think it's better to try to get that person scheduled on that first call. From time to time, Tiffany will hand somebody off to one of our therapists that has a specialty in LGBTQ population. And they just... it helps them to have a conversation and feel extra comfortable with that therapist. So that can be helpful. I would say maybe as a last resort, probably not the best protocol or just regularly do.

Tracel: I would agree with that.

Uriah: Yeah. And then the last one on this list is Offering Superbills. Or invoices. Really superbills for out-of-network reimbursement and we'll get to that a little bit more shortly, helping people understand how they can get some benefit out of their insurance, even if it's not the full benefits of using an in-network therapist. Okay, and I would say, like, generally speaking, you know, we're not trying to keep people on the phone and running through the list of, like, "hey, these are all the reasons why you should work with us!" It

should be a naturally-flowing conversation. And at times you you can ask people for their permission to give more information, because if somebody really, really wants to use their insurance and they're not going to be "sold", you don't want to spend fifteen to twenty minutes with them if, at the end of the day, they're like, "yeah, that's great but I just can't." Right? So you're going to have to use your intuition and your spidey senses to figure it out.

Tracel: Right. I've talked about this before that the customer service that you're providing, they're going to remember that. And if they say, you know, "I absolutely have to stay in network", you know, you understand that. And then, you know, I have often said, you know, if you can't find what you're looking for, you know, you can give us a call. We'd be happy to set up an appointment for you. And they're going to remember that and come back because of the customer service you provide and you've left the way open for them to come back.

Uriah: Mm-hmm, it does happen. Yeah. If you can't find what you're looking for, we're always here for you. Let us know if you need. And unfortunately, it's still hard to find the right therapist often, you know...

Tracel: Right.

Uriah: ...more so for certain populations. I think child therapists, really good ones are hard to find. Adolescent therapists, sometimes hard to find. So moving on, we've got Positive Reinforcement and Affirmation. And this is just...these are some of the the soft touches, I guess you could say, of being that compassionate guide and being kind and helpful in that process, because the most of the things on the previous slide we're talking about, this is just information. We're just giving you the details, like, this is where we're located. This is our availability. These are our specialties. That's all conveying information. And this is really about HOW you do that and you want to use what we call high touch, lots of empathy and encouragement and warmth, really. And, you know, just use this opportunity to say some people are just better at this than others, and that's not a good or a bad thing, it's just a different personality type thing. So if you happen to be a person who doesn't have, like, super gooey warmthness...I just made that up.

Tracel: *(laughs)*

Uriah: There's some ways that you can convey empathy and positivity without necessarily having to change your personality. And it's really just about saying the right things with a good tone of voice, essentially.

Tracel: Yeah, I was going to agree with that. Tone of voice is so important, you know, because you could have, you could have a lot of other things going on. You could have just had a call with somebody that maybe was difficult for you to handle because of the situation. And it's now put you in a different frame of mind. But you kind of have to let that go and treat this as a new call and be present in the call that you're on so that you can have that come out in your tone of voice.

Uriah: Definitely. Definitely. What do they say? People can hear your smile through the phone, or something like that?

Tracel: Yup, absolutely.

Uriah: Yeah. And that involves saying things like... the only one we have on this particular site because we don't want to fill the slide with too much text, but "You've called the right place. I'm so glad you called. This is a really good practice and we've got a wonderful therapist that is really good at what you are looking for." People are often ambivalent when they're calling for therapy, which means they're on the fence and they're not 100 percent sure.

Tracel: Mm-hmm.

Uriah: So they're, like... and in lots of situations, you know, they might not even want to, like, fully not want to.

Tracel: Right.

Uriah: But the husband is calling and is, like, "my wife, my girlfriend told me I've got anger issues. I need to see a therapist, but I hate it."

Tracel: Right.

Uriah: So we can just kind of, like, help them move along with some nice encouragement. I think that goes a long, long way. Or, of course, parents who've got kids or teens that are struggling. They could use all the compassion that you can provide for them.

Tracel: Right.

Uriah: And we'll do more trainings on this in the future. But that also is just things, like, empathetic statements, like "that sounds really hard. Gosh, I can't imagine what that must be like for you." And you don't have to go into therapy mode because you're not a therapist and it's not the intention. But you want the person on the other side of the phone to feel like, "Oh, they're with me. They understand."

Tracel: Right, right.

Uriah: "I see you're going through a hard time. Let me help you. Let me be that guy for you." So.

Tracel: Right. And if it's something that doesn't come naturally for you - because it is easier for some people than others - if for a second you could just try to put yourself in their place and think about what it would feel like needing help and not knowing who's

right, it might cost too much... All of those things. If you could just for a second feel what that would be like, that's going to help you be more empathetic to whoever you're speaking to on the phone.

Uriah: Definitely. A little goes a long way. I'm think about experiences that I've had with various medical practices - not to say one bad and one's good necessarily, but I think sometimes all-insurance practices or medical practices, you know, they're a little bit like sort of a factory and I mean, get them out.

Tracel: Right. Absolutely. Yes.

Uriah: Like, I went to a physical therapists' and they did, you know, they didn't have very good client care, to be honest. They were just booking appointments, booking appointments, just getting people in, getting people out. And when I stopped going, they didn't follow up with me.

Tracel: (*gasps*) Oh!

Uriah: Right?

Tracel: They didn't miss you, obviously.

Uriah: Whereas, like, my chiropractor who I just happened to pay out of pocket for, I don't have insurance that covers that.

Tracel: Right.

Uriah: It's a different experience. And that's not even insurance or private-pay necessarily. That's just personality and business kind of structure, if you know what I mean?

Tracel: Caring about other people?? (*laughs*)

Uriah: Yeah, it's just customer service. No big deal. Yeah.

Tracel: Right.

(*Both laugh*)

Uriah: So when it comes to talking about the fee, this is super important because it's not it's not the easiest part for most people to talk about money necessarily.

Tracel: Right.

Uriah: But it is super important for us to be clear about it, to state the fee and to not have hesitation in our voice and to believe in the value that the practice brings to those potential clients.

Tracel: Right.

Uriah: So the first first thing on our list here is, you know...and this is something that I made mistakes with in the past plenty of times. Don't ask if the fee is okay for them.

Tracel: (*chuckles*)

Uriah: Some... for some reason - and I think it has to do with therapists to some degree - but we often end up negotiating with potential clients when it's the therapist doing the phone calls.

Tracel: Right.

Uriah: And then at some point we realize, wait a minute, nobody negotiates with their lawyer. Yeah, I know your three hundred dollars an hour, but would you take two hundred? No....

Tracel: A sliding scale (*laughs*).

Uriah: No, probably not. Probably not. So I used to say something like, you know, "My fee is one hundred fifty dollars for a 50 minute session - does that work for you?"

Tracel: Right.

Uriah: Don't do that. Don't do that. That's one of the other points... we'll get to that. We'll get to that in a minute. But you don't want to introduce on the very front end some hesitation or lack of confidence or even some wiggle room necessarily. Depending on the practices policies, the fee may be firm. Like, that's pretty much what we do. There are some situations where we'll do pro bono, which is free counseling, and there's some rare situations where we just really feel compelled to help a particular client and we will change the fee for that. But for the most part, it's always one-fifty for a licensed therapist, one-twenty for a pre-license. That's just where we're at currently. So the important thing here - and this goes back to what we're saying about sales not being sales - is we're not trying to convince somebody to sign up for a service that they genuinely can't afford. Like, that's never going to be a good thing. But they need to know what the cost is up-front and they need to have a reasonable level of confidence that they can make it work. So... and oftentimes people won't say... sometimes they will say, "Oh my gosh, that's way too much money", you know, but most people will just kind of be quiet and like inside, they're like, "Oh I can't pay that", you know? And so they may or may not tell you "that doesn't work for me". But I think most people with a reasonable amount of intuition can tell if they just went quiet on the on the line or if... you know, I'm trying to see what other factors would tell you that they probably...

Tracel: They hang up on you?! Ha! That happened to me!

Uriah: They hang up on you? Yeah, okay - click.

(Both laugh)

Uriah: Right. So you want to try to figure that out... if you get a sense that they're like choking on the feed a little bit, part of my script has always been "it sounds like that might be a lot of money for you. I know that therapy is definitely an investment in your well-being, in the well-being of your family. It can seem like a lot of money. I just want to make sure this works for your budget, because I want you to be able to continue with the services that are really going to help you. And you don't want to get started with therapy and have to stop around three or four sessions before you really get what you want, what you need." So you want them to essentially consent to the fee and be able to say, yeah, that's okay. Sometimes there's the other side of that, too, is that in the times past when I've been unsure about my fee or maybe I just raised it and I'm quoting it for the first time... They might have zero issue with that. You never know.

Tracel: Right.

Uriah: Honestly, like, I've had many clients over the years who were very wealthy. And to me I thought one hundred and sixty dollars was an incredible amount of money. How can anybody afford that? And they don't even blink at it. In fact, in the past I've had people say, "Oh I thought you would be more", so you never know. You never know what people's financial situation is.

Tracel: Right. And, you know, we're all coming to it with our own thoughts about money and what we would spend for something. And so, you know, if it is something that truly to you, you're like, man, that's so expensive, you have to get right with it first and, you know, so that that doesn't come through. I worked with somebody whose fee was I mean, when I thought about saying the words I would like start to sweat and I'm going to stammer through this. And so I had to be okay with it myself first and then it just was able to flow without any hesitation, you know, when I was taking calls for him.

Uriah: You know, it's funny - and I know what you're talking about - one of the best justifications for the cost of therapy that I've ever heard was for couples counseling, specifically. I heard a lawyer, an attorney say the average cost of a divorce is about thirty thousand dollars. So if you can possibly go to a therapist and pay three thousand dollars, you write yourself twenty seven thousand dollars.

Tracel: That's brilliant *(laughs)*.

Uriah: Yeah, you can't always promise that, right?

Tracel: Right.

Uriah: But it can make the difference for sure. And it's not always a financial decision. Most of the time, it's quality of life, it's a relationship. You know, there's a lot on the line and it's not money.

Tracel: I did talk to a practice owner one time recently who was saying that she overheard her intake coordinator apologizing for the fee.

Uriah: Right.

Tracel: I, I couldn't even believe she was saying that. I'm like, no, you can't, you can, that cannot happen. So, you know, it may be more than you personally would pay for something, but so you have to get that right with yourself first so that you are confident when you are talking about money.

Uriah: Good point. Last one here is... I generally think it's a good idea to put the fees on the website stated up front. I didn't do that for years because I thought, oh, and I was kind of coached and trained to get people on the phone and then they'll see what the value that you can bring and the importance, blah, blah, blah. And then you tell them your fee. I don't like that anymore. I think people want to know what it costs before they get even twenty minutes into a conversation or ten minutes into a conversation.

Tracel: Right.

Uriah: And that transparency is kind of nice. I prefer that.

Tracel: And I think even now, when you're shopping around to buy anything else, you're able to check those things out online. You're able to compare prices. And so I think people have an expectation of being able to see that. And it certainly can make your life easier as an intake coordinator if that's already out there.

Uriah: Yeah, you will waste less time talking to people who really can't afford the services.

Tracel: Exactly.

Uriah: So part of this, too, is making it as easy and smooth as possible for that client. We were just talking about putting the fees on the website. I think that's a good, you know, a good point that could go on this slide as well. But a couple of things that we've noticed that have been really helpful for Productive Therapist clients is including a Start Here page or somewhere, maybe even on the home page, where it kind of guides people through what it looks like to engage - to engage, haha - to sign up for therapy services, engage and just to give them sort of a little bit of a roadmap. I remember seeing this for the very first time on a male therapist website, and he worked with men. And it was it was literally like step one, two, three, you know? I can't remember what the

steps were, but it was very clear; I was like, well, if I want to work with this this therapist, I know exactly what's going to happen.

Tracel: Right.

Uriah: So I think that kind of makes it nice. The second one is having excellent follow through. We've talked about this in different trainings. And this is the follow up process of making sure people don't fall through the cracks, getting back to people in a timely manner, of course, as quick as possible, and then following up with them if they don't respond to emails or calls and all throughout that process, being super friendly and super helpful. That's going to increase the possibility that any client will sign up for services, not just private-pay folks.

Tracel: Right.

Uriah: And the last one here is being Insurance-Friendly. This is sort of a higher level thing, practice structure kind of situation. But you can make recommendations potentially to the practice owner and say, hey, what do you think? Would it be possible for us to...offer superbills or check people's out-of-network benefits for them or maybe even submit out-of-network claims. We have some clients currently that we are working with who do that sort of, you know. I call that the most insurance-friendly that you could possibly be, right? So if you're on the phone with somebody and they've got insurance, but the practice doesn't take that insurance and you can say, "you know, we really work really hard to accommodate people who have insurance that we don't take. So these are the things that we can do for you if you want to work with us. We will send you a superbill that you can submit on your own or we'll check your benefits for you so you have that information beforehand." And then the most sort of labour-intensive...it's actually not that labor intensive, really, but clicking the button in the EHR to submit the claim for them. And so they don't have to do anything. I think that can be a nice selling point, right?

Tracel: Right. It's just another level of customer service.

Uriah: Sure, sure. And then the caveat here at the end of this...can't remember what's on the next slide. Okay, we'll get to that. Actually, let's do this first. So in some cases, not all cases, you might get into a slightly more in-depth conversation about the pros and cons of using their insurance. Did you do this a lot when you were providing the phone and intake services, or not so much?

Tracel: I didn't. I wish I had thought to do it and to have this specific training would have been super helpful because so many people don't understand their insurance to begin with. And so if you could explain that there are some pros and cons to it, it can help somebody really make an informed decision.

Uriah: That's true. I don't think most people understand how their insurance works and specifically for mental health treatment, the downsides of using that insurance. It used

to be more of a downside that, you know, if you got a mental health diagnosis that would potentially be become a preexisting condition and then hinder you from getting certain maybe jobs or insurance coverage in the future. Fortunately, the law has changed around that, at least in the United States. But still, these are some of the things that are drawbacks to using insurance. And before we get into the specific things here, I think it's probably a good thing to ask the person on the phone if they want to hear this part of the explanation, right? If they want you to give them the spiel about the downsides of insurance.

Tracel: Right, right.

Uriah: And that would just sound simply like "there are a couple of different disadvantages to using insurance and using an in-network provider. Would you like me to share that with you?" And then they say yes or no, and then you can proceed or not. So this is true across the board. Anytime somebody uses their insurance with an in-network provider, it's a requirement for them to be assigned a mental health diagnosis. And working with teenagers and families for so many years, there were lots of situations where there was no diagnosis... like, this was clearly just a relationship conflict, a family dynamic kind of situation. Nobody had serious depression or anxiety-

Tracel: Right.

Uriah: -or anything else. And so, I don't know, some people are uncomfortable with receiving a diagnosis that's not appropriate. And, to be honest, from the therapist standpoint, it's technically unethical to assign a diagnosis to somebody when it's not true-

Tracel: Right.

Uriah: -for the purposes of getting paid, right?

Tracel: Right.

Uriah: So that's one thing that's important to mention. The next one is that it's just not as confidential. If you see a private-pay therapist, there's nobody else that has rights to that information or the ability to kind of peek in, read notes, check up on progress, et cetera. But by the nature of using your insurance benefits, you're giving them permission to request notes, request updates. I think they call it like a... what's the word for that? Utilization review... where sometimes the insurance company will call the therapist and say, so what's been happening? How's the therapy going, you know?

Tracel: Right, right.

Uriah: And that's just personal information that you may not want...

Tracel: I bet that one alone would shock people because you always think of patient confidentiality, right?

Uriah: Right.

Tracel: To know that somebody else could have access to that... I will guarantee you that the majority of people do not know that one.

Uriah: It's not great. I mean, it's the insurance company. They're not going to do anything with it.

Tracel: Right.

Uriah: But still... And to some degree, it depends on the presenting problem and the issues that they're coming to therapy for. Some are more sensitive than others, right. You know, so that's just the personal, a personal...

Tracel: You just have some people that don't want anybody else to know their business, whether it's sensitive or not. So this one would probably freak them out if they knew this.

Uriah: Absolutely, yeah, yeah. I can think of lots of situations where people would be uncomfortable with that.

Tracel: Yes.

Uriah: And then the last one on our list here is that insurance companies can and will control the focus and frequency of sessions. They will oftentimes require authorizations, pre-authorizations and then ongoing authorizations. They can at any point say 'this is no longer medically necessary', like, 'you don't need therapy anymore'. Whether or not you feel like you're done, they feel like they're done or not. So that's just on the therapist side, and on the client side, that's just not great at all. We like to... as therapists, we like to have the ability to figure out when we're at the beginning, middle and end of the therapy process and not be told what to do about that. So those are some things that you can share. And honestly, you can condense a lot of that into a pretty short little script.

Tracel: Right.

Uriah: I won't do it for you right now but you can imagine how you could say "ABC, these are the downsides of using insurance. Just want you to be educated on what's best for you." And then even if they still go their way and find somebody on their insurance - like you said before, Tracel - they will have had a good experience with this practice, and then they might send somebody else as a word of mouth referral.

Tracel: Right. They're certainly going to appreciate the transparency; that you've shared this information with them. And that alone is going to, you know, do so much for them, either coming back to or, like you said, sending somebody else your way.

Uriah: Definitely. I don't know why, but I'm making all these correlations in my mind to, like, other service providers and other services. One thing I really appreciate about going to a restaurant and having a good waiter or waitress is when I say, hey, what do you think about the ribs? Should I get the ribs?

Tracel: Right.

Uriah: And they're like, yeah, I wouldn't.

Tracel: Right, I know!

Uriah: I really want the chicken sandwich, you know?

Tracel: Right. I'm like, thank you for telling me! I had a real problem. I needed a real answer. Yeah, and the tip just went up, right? And then you remember that. They were a great server.

Uriah: Absolutely.

Tracel: Yup.

(Both laugh)

Uriah: So yeah, that's what I call a compassionate guide - oh my goodness. One of my...I won't say pet peeves, but when I go to a restaurant and and I ask a question like that, "would you choose this or that?" And they have no opinion or they're like, "I've never tried either of those" or you know, "everything on the menu is good". I'm like...

Tracel: Right! That can't be true *(laughs)*.

Uriah: No, right? No, that can't be true.

Tracel: Unless you're a Michelin star restaurant, I don't think that's true.

Uriah: That is true. So we're at the end of this particular presentation on private pay pitch. That's a lot of Ps! So I hope that all these points have been helpful in guiding you in your conversations with future potential clients. And this is just kind of what we wanted to end on as a good reminder for clients, that sharing with them in one way or another that counseling is an investment in their well-being and their happiness; however, it's important that it works out for their finances. And this is kind of what I said before directly, that they don't want to start counseling that they really can't afford with a therapist that they actually connect with and they actually feel helped by and then need

to stop and and not continue and not get really what they need. I'm trying to think if there's situations in the past where...yeah, there have been a couple of situations where somebody was clearly about to sign up to see me and they couldn't afford it and I tried to not let that happen, so I would either either honestly lower the fee, but don't do that unless you have permission from the practice owner, of course.

Tracel: Right, right.

Uriah: Or say, "look, I would really love to work with you or we would really love to help you. But it sounds like this is not going to be actually ideal for you. And maybe this agency across town would be a better service for you." But most of the time, if you believe in the practice you work for - and you should - if you believe in the therapist that you are scheduling for and you should be able to do that, it should be more so you being confident and communicating clearly why it's a good choice for them to work with the therapist in that practice.

Tracel: And the last little thing I was going to mention when you were talking about maybe referring out - I think we maybe talked about this when we did a Q&A session - is that if you have... another thing that's really helpful and shows good customer service, if you know in the area who does take their insurance, because still they may have a list from their insurance company and they're just looking at a bunch of names they don't know from one or the other who would be better. And so if your practice has somebody that they normally refer to in the area and you know that they accept that insurance, that caller is going to be so grateful that you've pointed in that direction.

Uriah: That's a good point. That's a next level sort of customer service. And, you know, with other sort of situations when I've gone somewhere or been on the phone with somebody and they have... tried to think of a specific situation where they send me somewhere else that would be technically their competitor-

Tracel: Right!

Uriah: -but they say, "you know what, actually over here they're going to be able to to help you sooner or better" or whatever the case is, then I'm, like, immediately I trust them, right?

Tracel: Mm-hmm, right.

Uriah: And then if I have a reason to give them my business, I'm going to do so.

Tracel: Absolutely.

Uriah: So like we said before, a little goes a long way: kindness, encouragement, empathy, good communication of the fees and the benefits of working with the practice and the conversion rates will go up. You won't convince all people with insurance to pay

out of pocket, but you will help more make an educated, informed decision and that will help the world. So there you go. That's my closing statement.

Tracel: Right (*laughs*). It helps the world!

Uriah: You help the world! Thanks for watching. And we'll see you on the next one.

Tracel: Bye.

Uriah: Bye.