Treatment Planner Training Checklist and Evaluation

Employee Name: _____
Start Date: _____
Location: _____

This document provides an overview of your training progress, outlining your current standing relative to the required benchmarks. It includes a performance evaluation conducted by your supervisor, using a standardized rating scale to assess your strengths and identify areas for improvement. A score below the minimum threshold indicates insufficient performance and will necessitate additional training to ensure successful completion of the program.

Grading Scale (Per Category)

Each category will be graded on a 5-point scale per week based on performance:
5 = Excellent (No supervision needed, exceeds expectations)
4 = Proficient (Minimal supervision needed, meets expectations)
3 = Satisfactory (Some supervision required, needs improvement)
2 = Needs Improvement (Significant supervision required)
1 = Unsatisfactory (Unable to perform the task, requires retraining)

Minimum Passing Score

To pass, the trainee must achieve an average score of **4 or higher** to proceed to the next training phase. If any category falls below 4, additional training and re-evaluation are required.

Categories and Checklist

1. Patient Consultation & Treatment Presentation

- Greet new patients warmly and build trust through clear communication
- Review the patient's concerns and doctor's recommended treatment plan
- Present treatment in a way that emphasizes long-term benefits over cost
- Emphasizes treatment urgency and consequences of delaying care

Score/Trainer Initials: wk1_____ wk2_____ wk3_____ wk4_____

2. Same-Day Treatment Conversion (SDTX)

- Offer same-day treatment whenever possible per the Thrive Experience
- Educate patients on discounts and financing options to remove barriers
- Maintain a 75% SDTX conversion score or higher
- Coordinates with the back office to ensure smooth transitions for same-day starts
- Track and report SDTX performance weekly

Score/Trainer Initials: wk1_____ wk2_____ wk3_____ wk4_____

3. Financial Presentation & Insurance Coordination

- Ensures IVF details reflect on the tx plan correctly (fees are updated)
- Explain treatment costs, insurance coverage, and out-of-pocket expenses
- Offer and explain financing options (Payment Plans, CareCredit, HSDP)
- Knows how to treatment plan for orthodontics, offering our Grand Slam discounts, and correctly enter them into the patient's account in OpenDental
- Accurately creates payment plans in OpenDental
- Presents the Healthy Smiles Discount Plan (HSDP) to patients without coverage and understands we do not permit payment plans for Cash patients

Score/Trainer Initials: wk1_____ wk2_____ wk3_____ wk4_____

4. Scheduling & Follow-Up

- Efficiently schedule treatment visits to optimize provider's schedule
- Minimize gaps and maintain an organized schedule to avoid treatment delays
- Follow up on unscheduled treatment with phone calls and text messages
- Adds treatment plan blockouts on schedule
- Notates OP#, WP, MTC and Quad guidelines on the tx plan before going in to speak with pt

Score/Trainer Initials: wk1_____ wk2_____ wk3_____ wk4_____

5. Customer Service & Patient Retention

- Ensure all patients feel valued and comfortable during the financial discussion
- Address patient concerns professionally and empathetically
- Provide written and verbal post-treatment care instructions as needed
- Follow up with patients post-treatment to ensure satisfaction and encourage referrals
- Actively contribute to a welcoming, positive office culture

Score/Trainer Initials: wk1_____ wk2_____ wk3_____ wk4_____

6. Office Policies & Compliance

- Maintain HIPAA compliance and protect patient confidentiality
- Ensure proper documentation and detailed treatment plan notes in OpenDental
- Adhere to office policies for scheduling, payments, and patient communication
- Wear a walkie-talkie with an earbud daily for seamless team coordination
- Successfully reviewed and walked through the Emergency Protocol with the Office Manager

Score/Trainer Initials: wk1_____ wk2_____ wk3_____ wk4_____

7. Evaluation by Office Manager

- Ability to confidently present and close high-value treatment plans
- Accuracy in financial presentations, insurance verification, and patient records
- Professionalism in patient interactions and team collaboration
- Overall contribution to office efficiency and production goals

Score/Trainer Initials: wk1_____ wk2_____ wk3_____ wk4_____

Office Manager Feedback & Recommendations

Areas of Improvement:

- **Week 1:** _____
- **Week 2:** _____
- **Week 3:** _____
- **Week 4:** _____

Final Training Evaluation

- **Final Decision:** ✅ Pass | ❌ Fail
- **Additional Training Required?** YES / NO

Trainee's Signature: _____ **Date:** _____
Trainer's Signature: _____ **Date:** _____
