

Data migration planning-20250618\_173216-Meeting Recording June 18, 2025, 9:32PM  
2h 0m 25s 621792 274320 Ted Ennenbach started transcription 576072 292608 Trent  
Ennenbach 0:27 Seems like everyone's really excited for this one. 576072 292608 Ted  
Ennenbach 0:31 Super, super excited. 576072 292608 Trent Ennenbach 1:02 I'm sorry.  
Now. Kind of text, Louise. Unless you want to, Ted. You're on mute. 576072 292608 Ted  
Ennenbach 1:34 Go ahead and text him. 576072 292608 Trent Ennenbach 1:55 He  
accepted it when I sent out the request. So. No means much right now. 576072 292608  
Luis Escobar 2:26 Hi everyone. Hey, how's it going? 576072 292608 Renzo Mogrovejo  
2:35 Hey, guys. 576072 292608 Trent Ennenbach 2:37 I'm just ready to talk about a data  
migration. How you doing? 576072 292608 Luis Escobar 2:41 Mm hmm. Right on. Let us  
get right into it. Is is everyone here? 576072 292608 Renzo Mogrovejo 2:52 Yeah. And  
then wait. 576072 292608 Trent Ennenbach 2:52 Yeah. 576072 292608 Luis Escobar 2:56  
Great, clay. 576072 292608 Ted Ennenbach 2:57 Did did you invite Vite, Brian? I mean, I  
don't know that he needs to be in this one, but. 576072 292608 Trent Ennenbach 3:02  
Yeah, I didn't, Brett. I did invite Brian. I'm texting him right now. But I put him in you  
and him as optional. 576072 292608 Ted Ennenbach 3:08 Yeah. 576072 292608 Trent  
Ennenbach 3:09 So let's just go. Let's proceed. 576072 292608 Luis Escobar 3:19 All  
right. Sounds good. So yeah, this one will really get into I guess. Of the the process the  
the approach that we're gonna take for the one data migration, right? But then also  
data synchronization so that we we maintain synchronization going forward. Is that  
accurate? Or are we just trying to keep this as a one way? Data item sync. 576072  
292608 Steven Bennett 3:54 I think definitely. Like ongoing? Yeah. Connection between  
the two. 576072 292608 Luis Escobar 4:00 Mm hmm. 576072 292608 Steven Bennett  
4:02 And I have really more questions about kind of. If if we wanted to do a full  
migration into HubSpot, does that make sense and like and how does that look like?  
Do we wanna create custom objects for some of like the things that we use the most in  
open dental? Like the like, I think I asked the HubSpot contact, she said. We get a  
certain number of different custom object types, like if we created like an appointment  
object type. A patient. Membership. Maybe even just procedure lab test. I feel like we  
could move over almost everything. But yeah, that's a lot for me to like think about.  
576072 292608 Luis Escobar 4:50 Certainly. 576072 292608 Ted Ennenbach 4:53 Why?  
Why? Why would your aggregation table? 576072 292608 Luis Escobar 4:54 Yeah.  
576072 292608 Ted Ennenbach 4:59 Live in HubSpot. 576072 292608 Luis Escobar 5:02  
Which table? 576072 292608 Steven Bennett 5:02 Well, that's basically. It's a. It's a table  
that we have on a database. It's it was. It's called the aggregation table. It was basically  
an aggregation. It's it's in the OEM aggregation database and it's the OEM aggregation  
table. It was basically an aggregation of the data that was coming in from open

medical, open dental, whatever, and then activecamp or Suite CRM, which is our CRM at the time. And then feeding into active campaign. So we've disabled active campaign and suites. Don't use sweet CRM anymore. So it's really only being updated with values from open medical at this point, unless there's some like legacy people that were in there from when we use sweet CRM or active campaign. But it and it it has some calculated fields in there too that like keep track of. 576072 292608 Luis Escobar 5:38 Mm hmm. OK. Mm hmm. 576072 292608 Steven Bennett 5:54 Like program dates and it has some useful fields that are still being updated, but it's it was created by. Somebody who doesn't really work with us anymore. So it's a little bit of a black box. 576072 292608 Luis Escobar 6:06 Mm hmm. 576072 292608 Steven Bennett 6:06 I think. Created by a flow in Tableau. But I mean, I know have some of the fields are updated, but yeah. 576072 292608 Luis Escobar 6:14 Yeah. So I guess, yeah, the. 576072 292608 Steven Bennett 6:16 That's part of my task right now. Is documenting that. 576072 292608 Luis Escobar 6:20 So yeah, I guess part of the the the answer you know to to Ted's question I believe is like you know we we wanna have a single source of truth, right. And I believe HubSpot can be that right. You guys had the right idea by creating that aggregation, you know dashboard, right? There's, there's a lot of different ways to go about this, but essentially. Having the dashboards and the reports generated by the source of truth. Is, is is a more streamlined approach, right? And having that data of, you know, one way or another after the fact. 576072 292608 Steven Bennett 6:59 Definitely. 576072 292608 Luis Escobar 7:01 Well, we're looking at right now here inside of HubSpot is what they call their object library. I've actually never had the opportunity to use the appointments object, but this is actually supposed to serve as. A like a in person appointment. They even have patient instructions. So. It's kind of pre built for this kind of stuff. 576072 292608 Renzo Mogrovejo 7:30 Do you know if that entity is connected with Outlook calendar? 576072 292608 Luis Escobar 7:36 It can connect. Yeah, to to like a Google Calendar or an outlook calendar. It's it's just a like a they have the they have the meetings inside of HubSpot and then they have something called appointments. So I think this is something we can activate. It's a it's a new feature actually. Actually. As you can see, right? So we'll make use of that. Services also one of their newer like prebuilt objects, right? But that you know we don't have to stop there. Of course we can go and create these custom objects right as we should. There's already a few in here. You know we would create. You know any objects that we need? Maybe some objects we don't need? Maybe we don't need a, you know, have every piece of data from open medical sent to HubSpot. Maybe it's a it's a way to mitigate risk and and keep things a little more HIPAA compliant. We just want data that's gonna make HubSpot smarter at at at marketing initiatives. And sales

initiatives. 576072 292608 Ted Ennenbach 8:49 There's a lot of data, though. I think from that OM table that is not in open dental that we do want, right? 576072 292608 Luis Escobar 8:49 Umm. Mm hmm. 576072 292608 Ted Ennenbach 9:02 I mean, we if they completed a hormone health survey, even if it was five years ago, I think that that data is still important. 576072 292608 Luis Escobar 9:15 I hear you. 576072 292608 Ted Ennenbach 9:17 But but, but maybe not. I mean, I mean, if you're saying look at some point it times out, you know, I mean I don't know. I mean but, but I think it's. AI. Think it be cool as *\* if if we could identify all the data that we have and then then make a decision, right? I mean like like because you don't know what you don't know, right?* 576072 292608 Luis Escobar 9:41 Yeah. 576072 292608 Ted Ennenbach 9:43 *So I mean, my concern is.* 576072 292608 Luis Escobar 9:44 Yeah. 576072 292608 Ted Ennenbach 9:47 *My my concern is. The value of all this information and and you not knowing what we have, that could potentially be a game changer.* 576072 292608 Luis Escobar 9:59 *Yeah, you're right for thinking that, I think I think an easy solution would be to give me all the data from everywhere, but only give me 100 contacts. Right. So just a spreadsheet with 100 contacts and as many rows as it takes. Right, one row for every. I mean or one column for every. Variable and we'll feed that to the AI and and I'm sure we'll we'll be able to make a smart decision.* 576072 292608 Ted Ennenbach 10:30 *Yeah, I mean we we you know 100 contacts.* 576072 292608 Renzo Mogrovejo 10:31 *Yeah.* 576072 292608 Ted Ennenbach 10:33 *It depends on when you collected it, how you collected the the data.* 576072 292608 Luis Escobar 10:39 *Yeah. So.* 576072 292608 Ted Ennenbach 10:40 *You know, I mean there.* 576072 292608 Steven Bennett 10:41 *OK.* 576072 292608 Ted Ennenbach 10:41 *There's so many variables even to.* 576072 292608 Steven Bennett 10:44 *There, there's a lot of entries. I mean, honestly, like the the 100 contacts that you might go through 100 contacts and like the the fields that Ted is talking about, you might have like 6 that filled out those. That those surveys just because there's so many different content that's out like I think 100 may not be enough to get an accurate sample, but.* 576072 292608 Luis Escobar 11:00 *OK. OK. Or whatever percentage is like it doesn't have to be the entire thing, right? If that's gonna take longer, we just need a sample. More importantly, it's actually those columns that tell me what. What questions are we asking, right?* 576072 292608 Steven Bennett 11:19 *OK.* 576072 292608 Luis Escobar 11:20 *And then if the AI you know, hopefully we do have a a good percentage of answers on that question.* 576072 292608 Steven Bennett 11:28 *Casual.* 576072 292608 Ted Ennenbach 11:29 *You know what?* 576072 292608 Steven Bennett 11:30 *Was it?* 576072 292608 Ted Ennenbach 11:32 *Stephen, do we have? I mean, at some point*

*we dump the sweet CRM data, right? I mean into active campaign. Or if we still have access to the sweet CRM, I mean. 576072 292608 Luis Escobar 11:44 Mm. 576072 292608 Ted Ennenbach 11:48 Like. That that has to, I mean, all the qualities, all the column qualities should be. Identified I would think. 576072 292608 Steven Bennett 12:01 Yeah. The ones that we like identified, I guess are not. Yeah. The we identified at some point that like that go into the aggregation table. Those are still in there, but they're not being updated because we're not using Suite CRM anymore. As far like, there's definitely more information still that's in Suite CRM that is not in the OM aggregation table that I don't know. Maybe we decided we weren't interested in. At some point, or couldn't manage but. Or maybe maybe there's not. But I just. I would assume they're. They're we're not. We don't have it all in the aggregation table, but. 576072 292608 Ted Ennenbach 12:39 Well, that that would suck. That that would suck if we had. If we left information. 576072 292608 Steven Bennett 12:39 Yeah, there's. 576072 292608 Ted Ennenbach 12:47 You know, go. 576072 292608 Steven Bennett 12:47 But I I don't know that we have like we don't have access to that information still as I think Suite CRM was like something that was like usage based or something. So if we didn't use it, we could just like let it sit there. I have kind of a stupid problem where I don't remember the domain to log in, so that's where I I've been trying to figure out, but to see if we can still see that. But. 576072 292608 Ted Ennenbach 13:14 Yeah, I don't know. 576072 292608 Trent Ennenbach 13:16 Ted, do you have access to sweet CRM? 576072 292608 Luis Escobar 13:16 Ashley. 576072 292608 Trent Ennenbach 13:18 Do you want me to get on Steve Flores's? I can go get on Steve Flores's old computer real quick too. 576072 292608 Ted Ennenbach 13:19 That's what I'm looking at now. 576072 292608 Luis Escobar 13:24 Gotcha. Also, what percentage of those contacts have emails and phone numbers? 576072 292608 Ted Ennenbach 13:29 All they would all have, they would all have one, one or both. 576072 292608 Luis Escobar 13:30 All of them. Gotcha. 576072 292608 Steven Bennett 13:37 Louis was Andrew from Sciotech able to get you set up with connection to the database so I could tell you the table that I'm talking about, but. 576072 292608 Luis Escobar 13:48 No, I haven't actually. Gotten access to that? We can go over that now if it's easy to do. 576072 292608 Steven Bennett 13:57 I kind of passed it off to him. 'cause. I'm not the best person to get you set up with that. He's kind of they manage our servers and he has all the the credentials there. 576072 292608 Luis Escobar 14:07 I gotcha, OK. Let me follow up with him then and so he can properly set me up on SIP team. Is that done? 576072 292608 Steven Bennett 14:17 It would be sciotech I think. Probably*

Andrew at Sciotech dot. Something. 576072 292608 Trent Ennenbach 14:25 Do the e-mail right now. 576072 292608 Luis Escobar 14:27 OK. 576072 292608 Steven Bennett 14:28 He said. He said he reached out to you, but. 576072 292608 Luis Escobar 14:30 Andrew Murphy. Yeah, you did. 576072 292608 Trent Ennenbach 14:32 Yeah, yeah. 576072 292608 Steven Bennett 14:32 Yeah. 576072 292608 Luis Escobar 14:33 Yeah, I got. Him. I'll switch base with him. 576072 292608 Ted Ennenbach 14:42 Umm. 576072 292608 Steven Bennett 14:43 But. Yeah, I guess. Like can we treat HubSpot like like a database? Like is it gonna be? Is it gonna have that much storage? Like, do we have a limit on that? I guess that's gonna kinda dictate how much of this data we can use. 576072 292608 Luis Escobar 15:03 We yeah, it is a full-fledged database essentially right. So you know, generating all those different objects and then custom fields, we can then generate custom reports out of that, right? And essentially build those. That aggregate aggregation dashboard that you had and probably you know many, many more different dashboards, right? Some that the whole team can have access to, or certain teams have access to. Umm. Sorry, I think it's a. It's there's a ton of advantages just by, you know, having HubSpot be like, yeah, the the source of truth essentially that that that can report on everything. And the OR and the OM. And you know any other, you know, third party databases, even the website itself in newlife.com that's a database in itself. Those things are all just feeding into HubSpot and. That's that's how we get our our reports. 576072 292608 Steven Bennett 16:18 I mean Renzo and I have used the hubdb feature of HubSpot a little bit. Would it make sense just to do like a one to one dump of all of our open medical tables into? Into hubdb and then have those just be updated. 576072 292608 Luis Escobar 16:36 Yeah, that's the. Probably the simplest approach, right? And then for yeah, the ongoing sync, we have to look at the API and and I'm sure we can set up an even a Zapier connection if anything. So I was just looking at your marketing contact limit, right? 576072 292608 Renzo Mogrovejo 16:59 Yes. 576072 292608 Luis Escobar 17:00 So that's the only like kind of tricky part with HubSpot where they they they kind of tap the amount of contacts that we can actually market to and what they call market is send emails and that's about it really you know we're still able to send them text. 576072 292608 Renzo Mogrovejo 17:02 OK. 576072 292608 Luis Escobar 17:19 Messages through our other systems and and even emails through our other systems. So it's kind of like. A song and dance, just like cleaning up the amount of contacts that we're considering our marketing contacts. I would consider, you know 12,000 marketing contacts as in like that's how many people were like actively trying pitching and

*selling and trying to get them to buy or up. Sell if that makes sense. Anyone who's like, I don't know, three years old or something, right? And not really showing any activity. They can still reside inside of HubSpot, but they wouldn't be a marketing contact. So that that's the only like a cap that we should always be aware of or.*

*576072 292608 Steven Bennett 18:15 So it it just figures that out. By just I mean it just looks at the individual e-mail domains that we send to each month.*

*576072 292608 Luis Escobar 18:25 Yeah, each contact is either like declared a marketing contact or not.*

*576072 292608 Steven Bennett 18:30 Oh, OK.*

*576072 292608 Luis Escobar 18:31 Here. They don't really make it seem easy to find.*

*576072 292608 Ted Ennenbach 18:40 Yeah.*

*576072 292608 Luis Escobar 18:43 Either.*

*576072 292608 Ted Ennenbach 18:45 It doesn't look like the suite cacrm at least the access that I have is is complete at all. So. Like it it there, there must either the data was deleted or. Or, you know when they moved it over, they wipe suite crmi don't know, but. It's only showing 252 contacts. I'd I'd be curious. Those are from the fall of 2024. I'd be curious if. If those were, if those were ever migrated over to active campaign and thus migrated to. HubSpot but. It's almost like. It's almost like we we made a switch, but we never redirected the leads and they they kept coming into suite CRM. So I don't know if those leads were ever even approached.*

*576072 292608 Luis Escobar 19:59 Oh wow, yeah.*

*576072 292608 Steven Bennett 20:01 Well, we pretty much stopped using sweets. We I think we stopped using sweets CRM before we stopped using activecampaign.*

*576072 292608 Ted Ennenbach 20:11 Right, right, right. But but but when you go into the BSM suite CRM you you see 252 leads that are all within a month period where it looks like they were still going into suite CRM. But were they? But you know, were they also going into active campaign? I don't know.*

*576072 292608 Steven Bennett 20:40 Oh yeah, I don't know that.*

*576072 292608 Ted Ennenbach 20:40 All I know. Yeah, when I. So so the only way to know it is to go in. Look at those 252. Records and see if they match up.*

*576072 292608 Luis Escobar 20:55 Yeah, there has to be like a unique identifier sorts.*

*576072 292608 Ted Ennenbach 21:11 So the only thing that suite CRM held were leads. So the which means they just came in as a lead once they were scheduled in open medical. They were then classified as a prop prospect.*

*576072 292608 Luis Escobar 21:32 Mm hmm.*

*576072 292608 Ted Ennenbach 21:32 So. So what? That what that really means is, unless you walked in or you saw a TV ad or heard a radio ad and just called in. Any digital type lead or or website type lead or whatever would all come into suite CRM. So Suite CRM is the catch. Was was the catch all for all leads except for the ones you know that would just call or walk in the door. Because those those were not being input into*

suite CRM because at that point they they were never a lead. They just they they. They they just booked, you know, so. You know. 576072 292608 Luis Escobar 22:23 I gotcha. Yeah, I would suggest we import, you know as much as we can, right. Even if it is all of it. The first step is just getting all those objects ready and all those fields ready for the import. So yeah, I would just need like a sample size, right? Like in a CSV format or or. I have not. If there's another way to get that. 576072 292608 Steven Bennett 23:09 Yeah, I mean, I can give it to you. C at CSV. 576072 292608 Renzo Mogrovejo 23:12 Yeah, we we can export what we have. 576072 292608 Luis Escobar 23:15 Yeah. OK. Is it like super simple? I could like upload it to the AI right now and get some pretty tangible insight. 576072 292608 Steven Bennett 23:28 I have AI have a document with I don't know. It's not. Not really. I guess it's a. It's basically a mix of like two basically fields from open dental fields that came from the suite CRM and then like kind of some calculated fields. 576072 292608 Luis Escobar 23:40 Mm hmm. Mm hmm. 576072 292608 Steven Bennett 23:49 I mean certain fields are are readable, but there's not a lot of documentation on what sets there once. 576072 292608 Luis Escobar 23:58 Gotcha. Yeah. I mean, if you have it at hand, go ahead and and we can just see what it what it gives us and then you can you know we can do the full comprehensive you know upload as soon as it's ready. 576072 292608 Ted Ennenbach 24:12 Do we? Do we want to start throwing this stuff into? 576072 292608 Steven Bennett 24:13 Just like all. 576072 292608 Ted Ennenbach 24:16 Do we want to start throwing this stuff into AI because of compliance? I. I guess I'm a little concerned about that. 576072 292608 Luis Escobar 24:25 You you can delete the names and and contacts even I'm more interested in like the fields. What? What? What are the? 576072 292608 Ted Ennenbach 24:33 Right, right, right. 576072 292608 Luis Escobar 24:35 The headers of those fields. 576072 292608 Ted Ennenbach 24:38 OK. 576072 292608 Renzo Mogrovejo 24:41 Uh. So do do you want us to share with you, CSP? 576072 292608 Luis Escobar 24:51 Yeah, that'd be perfect. 576072 292608 Steven Bennett 24:52 Gotcha. 576072 292608 Renzo Mogrovejo 24:53 File so you can just a sample or. 576072 292608 Luis Escobar 24:53 No. 576072 292608 Steven Bennett 24:55 Let's see. 576072 292608 Luis Escobar 24:58 Yeah, just a sample. 576072 292608 Renzo Mogrovejo 24:59 The just a sample. OK, so you will check. We're going to discuss what fields are going to be created. 576072 292608 Luis Escobar 25:10 Correct. Yeah. Yeah, I'll upload it right now. We get an answer in like couple minutes. 576072 292608 Steven Bennett 25:15 Went wrong while sharing. Let's try again. There you go. 576072 292608 Luis Escobar 25:38 Now the the initial sink I think should be pretty simple process. The

ongoing, you know, sync and and keeping things In Sync, that's the one that I want to just put a little more attention on, right. 576072 292608 Steven Bennett 25:58 Yeah. 576072 292608 Renzo Mogrovejo 26:01 Yeah. 576072 292608 Steven Bennett 26:03 So I mean our the kind of the plan going forward was. To try to well, I mean Lorenzo and I had discussed a few of the questions. We wanted to talk to you about, like, what do we think is the best method for some of these? Like, do we want to have almost like fields like 1 to one mapped between HubSpot and open medical? Or do we want to have like like the example that I had in mind was I was working on a fee schedule manager. So that the completion of a procedure code that defines a program changes the fee schedule automatically to either member or non member. That's what controls our pricing. And it would be like automatically changed based on whether they added the extension code to the procedure or if they enter the discontinue code and that would just change the fee schedule. And then like there's a custom field that is for display really only. In open medical and then also it would change like membership dates in HubSpot. And like us, the step like the status of their membership. So like I don't like. So should we be creating those automations where like this one action has a bunch of actions happen or should we? Kind of be mapping more so one to one like where OK, we have the program end date, program start date and open medical. Same thing in HubSpot. We updated real time and open medical and then like it syncs, syncs at the end of the day it helps, OK. 576072 292608 Luis Escobar 27:39 That would be the best approach. Yeah. 576072 292608 Steven Bennett 27:44 Gotcha. And I guess yes. 576072 292608 Luis Escobar 27:46 It could. It could be real time or it could be also like. Every, every three hours or every, you know, whatever schedule you know that works best. 576072 292608 Steven Bennett 28:00 And I'm sure that kind of depend on what the field is maybe. I don't know. 576072 292608 Luis Escobar 28:06 Now what? 576072 292608 Steven Bennett 28:07 You'd have, you know. 576072 292608 Luis Escobar 28:07 What? What? Platform are you are gonna use to to sync or will you build like a native API connection? 576072 292608 Steven Bennett 28:17 That the three kinda options that we had considered or or that I don't know that I had we had listed out were like continuing to use Zapier which I don't know. I have some concerns about the cost of that getting out of hand. 576072 292608 Luis Escobar 28:32 Mm hmm. 576072 292608 Steven Bennett 28:34 I don't know about in a in a in too much, but what? Whether that is an option or open dental has like the option to build or add in C plugins which I was just kind of starting to. Uh. Explore for the fee schedule manager which? 576072 292608 Luis Escobar 28:50 Mm hmm. 576072 292608



Steven Bennett 28:52 It's, I mean it's coding, but I mean you could have an AI do most of the coding with accurate description. I've learned so. 576072 292608 Luis Escobar 29:02 Yeah. 576072 292608 Steven Bennett 29:02 Yeah, that, that's that's another option that that you could build in and I guess runs basically for free. I think that's definitely a better task, or that's definitely a better option for like the large data sinks, I feel like. 576072 292608 Luis Escobar 29:17 I think so. 576072 292608 Steven Bennett 29:18 Where zapier. Zapier, probably more of like the instantaneous updates that we need to data or in A10. I don't really know. 576072 292608 Luis Escobar 29:26 Yeah, I I would recommend an 88. It's there's like a lot of advantages. It's it's actually cost effective compared to Zapier. And the way we're able to then utilize that with the AI agents. Will will really be advantageous if. If we do the connection with NAA versus Zapier, right? And of course, for the, you know, for the those bulk imports like you said, you had that native connection should also be good. 576072 292608 Steven Bennett 30:13 We I mean we have certain all like I don't know. We have certain automations like. Like the no show. No we won't. Like we want to charge a no show fee. If instead of charging the upfront fee like that would be one that I think needs to happen instantaneously, that's like OK appointment status or maybe after 5 minutes appointment status is set to. Complete. Like I guess that type of thing. Those, I guess we we just kind of build those as we find the need for them like because that could also update like a deal amount. 576072 292608 Luis Escobar 30:49 Yeah. 576072 292608 Steven Bennett 30:53 Whether it was \$25 like the No show fee or whether it was the actual appointment amount. 576072 292608 Luis Escobar 31:00 Yeah, I think that's a that's a good one. And so, yeah, on that note, I mean, we can use HubSpot to a certain extent to do that. Well, but I I really think we should. Use stripe as our primary source of of credit card processing. Just because. 576072 292608 Steven Bennett 31:20 Yeah. 576072 292608 Luis Escobar 31:20 Well, the primary advantage is that we'll be able to use Apple, Apple Pay and that that will guarantee an increase in revenue. If we do nothing else. And then secondly is, yeah, we will be able to do those kind of like you know creative schedules where like if if somebody is a no show, I don't I don't think I'm. And on an automatic basis like we can have Na connect two stripe and handle that directly. 576072 292608 Steven Bennett 31:44 Yeah. Yeah. Gotcha. I. I guess I should. I should have been more clear. I was just. I was kinda just using that as an example, but 'cause there's like a lot of things that happen when the note like if somebody knows shows then like for like a in person baseline. I don't like there's a lot of things that could happen there. We wanna adjust the deal amount. We would wanna maybe

charge a no show fee. We would wanna maybe have a task that's created for the MCA to reach out to them like. For like those types of tasks I I think I don't know I guess. 576072 292608 Luis Escobar 32:20 Yeah, we could put. 576072 292608 Steven Bennett 32:24 They'll be setting some of the fields that are already being set, I guess. Like on a different page. 576072 292608 Luis Escobar 32:29 Yeah, correct. If if like we can set parameters where like in some situations we just let it go, you know fully automatic. In other situations, due to like some variables missing or you know. There's a fork in the road where basically there's a human in the loop. Node inside of the NA automation where it basically brings in a person to either fill in a field or the prospect has to do something or an administrator has to click a link or something and then until one of those actions happen, you know or it doesn't pro. 576072 292608 Steven Bennett 33:11 Gotcha. He says. 576072 292608 Luis Escobar 33:14 So we'll need to identify those scenarios, right? That's important. 576072 292608 Steven Bennett 33:18 Right. 576072 292608 Renzo Mogrovejo 33:28 Louis, one important aspect is that we may have some information on the on the contact field. That were that were. Fill during the the operation, let's say when a new contact is created and the contact trigger the the patient creation. So during the migration, we may consider that we already have some values. On those fields. 576072 292608 Luis Escobar 34:02 Hmm. Gotcha. See. 576072 292608 Steven Bennett 35:52 Yes, as a first step maybe. Does it make sense just to like port all of our open medical database tables over to HubSpot into hubdb like I guess we could update those in whole every day. I I don't know like and just until we can figure out like kind of where those map to but still have the AI just running over that data figuring out. 576072 292608 Luis Escobar 36:20 Yeah, I think it's a great idea. I mean. 576072 292608 Steven Bennett 36:21 Kind of structure it. I don't know how like reasonable that is like from a like I don't know. Is that a lot to expect? The entire database to update every day or something. 576072 292608 Luis Escobar 36:33 We don't. We don't need. Every part of the database to update every day. Only those that are. Are modified. If a recording Spotify for some reason, then the signal gets triggered. 576072 292608 Steven Bennett 36:46 True, true, true. 576072 292608 Luis Escobar 36:54 Sometimes there will be a need for like a full sync. Maybe you know those can be periodic? Those can also happen like in the off peak hours. A lot of systems do that sometimes. 576072 292608 Steven Bennett 37:11 Yeah, I just didn't feel like if, like a change to A1, like one change to a table make you know, if you have to update the whole table or yeah. 576072 292608 Luis Escobar 37:23 Oh yeah, we can make it. Super granular where not even the entire record updates, but just that field in

that record updates. That's that's the flexibility we we can get also with. And a is that your? You know, they they love charging a lot 'cause they they kinda force you to use the entire ZAP. 576072 292608 Steven Bennett 37:56 Yeah, they would break everything up into different steps. Filter path. 576072 292608 Luis Escobar 38:02 Last treatment code. That one sounds good. 90 day inactive. That sounds awesome. E prescription authorized date last RX verification. 576072 292608 Steven Bennett 39:00 Some of the fields that I've like found really useful. I've one that was the LC appointment last completed appointment. That one has some weird kinks to it with how it's updated, but like the base lot or what is it? Like date, complete BL, date complete, BR date, complete NR date, complete DC those are like date complete of their baseline. Review their baseline lab draw. Their discontinued date, their non renewal date. I think those are useful for a lot. The the first visit date is another good one. The script or like the the program. What what types of programs? Obviously they're on. 576072 292608 Luis Escobar 39:54 Mm hmm. 576072 292608 Steven Bennett 39:54 There's there's some sources in here. 576072 292608 Luis Escobar 39:58 Life cycle stages, so status OM OK, this is great. 576072 292608 Steven Bennett 40:02 Yep. 576072 292608 Luis Escobar 40:04 So when it comes to state lifecycle stages. Upspot has a really good pipeline feature. Right. So there's your standard pipelines that Helpspot brings, but then you're you're also able to create like custom pipelines. 576072 292608 Ted Ennenbach 40:22 Which we we need to use the terminology that we've shared. 576072 292608 Luis Escobar 40:22 Umm. Correct. See. Contacts. They have life cycle stage. Which are. You see right here D stages. We want to configure these. Even rename them, although you know some of these make sense to keep like marketing qualified sales qualified, but we can add to these. I mean, we can have, you know, 50 different stages. Or we can get really elaborate with it. Also for deals pipelines. OK. Yeah, you guys had the right idea already. You see a different was that your same idea there to create different pipelines for different treatments? 576072 292608 Steven Bennett 41:30 I hadn't set those up, but yeah, I'm sure that they. Like yeah, that that's the the workflow for for doing that. Yeah, as follows the same. I think that was probably used in MENA or Gabriel. 576072 292608 Luis Escobar 41:48 OK, great. So yeah, like right here, you see baseline review completed. No right here is where we would go and create some sort of automation in here. Right SMS. Send SMS. Etc. 576072 292608 Renzo Mogrovejo 42:11 Do you recommend we do that for treatment or? For kind of service. 576072 292608 Luis Escobar 42:20 I mean, good question. I mean, if, if if they're all pretty. Much the same, you know workflows. 576072 292608 Renzo Mogrovejo 42:28 Let's

say. 576072 292608 Luis Escobar 42:30 Then yeah. But if there's like an outlier, then it should get its own. Pipeline. 576072 292608 Steven Bennett 42:42 Yeah, our problem. I. I guess it's just that I don't think HubSpot is being told the when the baseline review is completed like. There was a one time, I think. Maybe a one time migration from the OM aggregation table to the HubSpot, but I don't. It's like being updated in any way, unless it's from like a telehealth workflow, that kind of goes through HubSpot. 576072 292608 Luis Escobar 43:08 Yeah, what? What is the website for open medical Open dental? 576072 292608 Steven Bennett 43:09 That's the problem. 576072 292608 Luis Escobar 43:17 Or do you? Do you know they're? Do they have documentation somewhere on their API or or their system? 576072 292608 Steven Bennett 43:22 Yeah, I can send to you. 576072 292608 Luis Escobar 43:24 Yeah. Can you share that with me please? 576072 292608 Steven Bennett 43:28 There's a lot of pages. They have hidden here. Just like I don't. 576072 292608 Luis Escobar 43:33 Is this one of them? 576072 292608 Steven Bennett 43:33 I guess you have to have like permission. Yeah, that that was the one. I just sent. But there's a lot more detail on specific. Features and stuff than it's just here. Especially in the quick manual section, I guess there's a lot. That's where. 576072 292608 Luis Escobar 44:19 Still, it's still working. Approximately how many records are we talking about in this sync? 576072 292608 Steven Bennett 45:06 That's good question. 576072 292608 Ted Ennenbach 45:16 Didn't HubSpot have 72,000? 576072 292608 Luis Escobar 45:21 Yeah, currently. 576072 292608 Steven Bennett 45:21 Like patient patient records or just rows. 576072 292608 Luis Escobar 45:25 Hmm. Records with you, with emails and phone numbers. 576072 292608 Steven Bennett 45:31 Oh. 576072 292608 Ted Ennenbach 45:35 Well, all the. Patient records for for sure 'cause they wouldn't be in there without it. OK. There might be one or two that don't have e-mail. Possibly. 576072 292608 Steven Bennett 46:26 65,000. Where either just where either phone or e-mail is not NUM not null, or wireless phone or e-mail is not null. 576072 292608 Luis Escobar 46:37 Mm hmm. 576072 292608 Renzo Mogrovejo 46:38 Are you considering the deleted? The deleted ones. 576072 292608 Steven Bennett 46:45 That this was from the this was account from the OM aggregation table from open medical. It's probably. 576072 292608 Renzo Mogrovejo 46:50 Oh, OK. 576072 292608 Steven Bennett 46:54 Higher, probably much higher. 576072 292608 Renzo Mogrovejo 46:56 Yeah. 576072 292608 Steven Bennett 46:58 Well, I guess our what's our patient number count at, it's like 36,000, OK. 576072 292608 Ted Ennenbach 47:02 3036 thousand. 576072 292608 Steven Bennett 47:06 So I mean probably around there. 576072 292608 Renzo Mogrovejo 47:07 Oh my God.

576072 292608 Luis Escobar 47:11 Got it. 576072 292608 Ted Ennenbach 47:21 Lots of data. 576072 292608 Luis Escobar 47:24 Regarding the HIPAA stuff, like what? What is it? What can we avoid syncing or don't have to send to HubSpot so we don't? If we don't have to, we don't need to. 576072 292608 Steven Bennett 47:41 That's that's that's like data or I don't know, that's I've gotten a very blurry answer whenever I've done my research on that. 576072 292608 Luis Escobar 47:41 Forward. 576072 292608 Steven Bennett 47:47 Some things say like it just it says Phi. So anything that's related to the the date or treatment or anything like that, like you can only specify, I feel like I think their age within a year like you can like their birth date within a year like you can only. 576072 292608 Ted Ennenbach 48:07 Why do you ask? What's the concern with those? 576072 292608 Luis Escobar 48:12 I mean I'm. I'm coming across a lot of like, you know, concerns of HIPAA as I'm going through this implementation process, right. 576072 292608 Ted Ennenbach 48:18 Yeah. 576072 292608 Luis Escobar 48:18 So if there's a way to mitigate that, I'm I'm all for it, right? We just need to tell HubSpot how to do good marketing and sales, right we don't. 576072 292608 Ted Ennenbach 48:31 If you not anonymize so so, so, so all the patient, all the patients that we've ever had, well that that were that were not in written chart form, right but but but but we have 35 thousand 3036 thousand medical records each medical record has a. 576072 292608 Luis Escobar 48:35 Yeah. 576072 292608 Ted Ennenbach 48:54 Unique identifier as a patient number. A patient number so. So you could. Not. Dynamite's first name, last name. And and build but but but yet include their e-mail address I think. And and build campaigns around that. 576072 292608 Steven Bennett 49:19 But their e-mail addresses is Phi. Like all the marketing information I think is is gonna be, I don't. 576072 292608 Ted Ennenbach 49:28 Phi. 576072 292608 Steven Bennett 49:28 I don't know. Yeah. I mean, obviously you're obtaining it in other places too, and you've got you've got permission to contact those people, but. 576072 292608 Ted Ennenbach 49:33 Well, we have to give away. We have to give it away to ultimately be able to market to them, right. I mean, so we have to be able to attach. 576072 292608 Luis Escobar 49:42 No. 576072 292608 Ted Ennenbach 49:43 We we have to be able to either create this closed ecosystem ASAP or. Is is HubSpot not HIPAA compliant? From a database perspective. I assumed it was, which is why we chose chose it. But maybe maybe I'm wrong. 576072 292608 Luis Escobar 50:19 No. As of June 2024, they are. 576072 292608 Ted Ennenbach 50:35 Well, the good news is is June 2025. 576072 292608 Luis Escobar 50:39 Yeah. I think that's a fairly new thing, 'cause. Never had a \*\*\* figure that out soon. Go. 576072 292608 Steven Bennett 51:00 Yeah, it's. I

mean it's not really HubSpot. I guess we're concerned about as much as the AI tools. The AI agents like what data can we provide to them? That unites the marketing and healthcare data without. Breaking HIPAA like I don't know how to how that connection is kind of made. I mean I guess with the Pat NUM possibly, but you can't even provide the e-mail, you just have to. We'd have to have, you know. Take, like, dissociate the e-mail from the Pat NUM before reuniting the data.

576072 292608 Ted Ennenbach 51:43 Umm. 576072 292608 Steven Bennett 51:44 Right. I mean, does that make sense? 576072 292608 Luis Escobar 51:46 Yeah, yeah. 576072 292608 Ted Ennenbach 51:49 Uh. 576072 292608 Luis Escobar 51:49 So. 576072 292608 Ted Ennenbach 51:51 Yeah, but then then you can reunite it again once AI is giving you suggestions, right? I mean like you have to be able to to bring it all back together. 576072 292608 Luis Escobar 51:58 Mm hmm. 576072 292608 Steven Bennett 52:04 Right. And then I think there is some there's like from what I was reading, there's some like levels of granularity that you cannot like that you can provide to AI like I know it was a point that I read about age or birthdays or something that you can only. Like, say, what their age is within a within a year or something, unless they're over 89 years old, then they have to. 576072 292608 Luis Escobar 52:32 Mm hmm. 576072 292608 Steven Bennett 52:32 They have to be classified as over 90 or something like there's. 576072 292608 Luis Escobar 52:35 Yeah. 576072 292608 Steven Bennett 52:35 There's a lot of weird rules about that. 576072 292608 Luis Escobar 52:39 So I. 576072 292608 Steven Bennett 52:39 And like location, that too. 576072 292608 Luis Escobar 52:42 Mm hmm. So with Nan, it's basically like a server, right? So I typically use their self hosted cloud version right with many of my projects for us to be HIPAA compliant, we'll have to use their self hosted version, right? And this this is gonna be basically running on a machine in your in your guy's office. It's essentially think like you have a Zapier running in your office and you own that Zapier. 576072 292608 Steven Bennett 53:19 Sounds sounds like a plan. 576072 292608 Luis Escobar 53:22 Mm hmm. 576072 292608 Ted Ennenbach 53:27 It it basically says I mean a lot of the HIPAA stuff. I mean, the only time when you really cause harm. I mean, if you're, if you can. Document safeguards that I mean like like these are the safeguards that we have put in place. Even though there's a leak or or there there, there is a disclosure of PHI. 576072 292608 Luis Escobar 53:55 Mm hmm. 576072 292608 Ted Ennenbach 53:56 If you can, if you you can defend it by saying, look, it was an accident. It happened. The only the only time it becomes a financial issue is if someone can claim that that US disclosing something. That we know about them cost them their job or they were not hireable, you know, it was

*public. You know someone has active form of cancer, so. So then an employer won't hire them or potentially fire them because of the cost to their like health insurance, you know, I mean so. So so like I guess my my point is. Is things have really settled down, I mean with regard to that, as long as you show that that, that that you don't lack safeguards, I mean that, that that we are doing everything you know that that that we can I mean. So, so, so which which I'm sure we would but but but but but but, but even the agencies say.* 576072 292608 Luis Escobar 55:07

*Yeah.* 576072 292608 Ted Ennenbach 55:12 *You know, look, I mean, accidents happen, right? I mean so, so I mean.* 576072 292608 Luis Escobar 55:16 *Mm hmm.* 576072 292608 Ted Ennenbach 55:19 *And I don't know. I mean like word, we are a health. We are considered a WellCare provider. I don't know how much. Damaging. Medical health information we have. About folks, I mean.* 576072 292608 Luis Escobar 55:40 *Mm hmm mm hmm.* 576072 292608 Ted Ennenbach 55:41 *I mean, OK, Ted's a fat \**. Right. I mean, you know, maybe Ted's a fat \*\*\* or or you know. 576072 292608 Luis Escobar 55:45 *Good.* 576072 292608 Ted Ennenbach 55:49 *Whatever. But I don't know that we have the. Diagnosis codes that even relate to to mortal diseases.* 576072 292608 Luis Escobar 55:58 *Mm hmm.* 576072 292608 Ted Ennenbach 56:02 *You know what I'm saying?* 576072 292608 Luis Escobar 56:03 *Gotcha. I hear you.* 576072 292608 Ted Ennenbach 56:04 *Like like, we're never gonna die. Die diagnosed lymphoma or Melanoma or lung cancer.* 576072 292608 Luis Escobar 56:12 *Mm hmm.* 576072 292608 Ted Ennenbach 56:14 *I mean so. But but I mean, we can't have access safeguards. Risk assessments we have to have SOP in place. But but but. But I mean I I just think. Lawyers have settled down because court courts aren't aren't as I mean back in the day, they were just awarding tons of money, right?* 576072 292608 Luis Escobar 56:42 *Mm hmm.* 576072 292608 Ted Ennenbach 56:51 *To to stuff so.* 576072 292608 Luis Escobar 56:56 *We got this in the bag, I think. So look right here. We have. These are all the open dental fields. From that sample I got. Here, right next to it are the HubSpot fields. It's recommending we create. With the type, their number singles drop down. And well sync priority etcetera. But essentially we want all all these fields created in HubSpot. And then it'll find its way.* 576072 292608 Ted Ennenbach 57:38 *It would be great if we had this survey forms. I mean, you know, the health surveys, maybe it's in there somewhere. I don't know. But but I mean what? You know what? What? What? What was their goal? Right. I mean we that's got to be somewhere in the data. What? What? Why did they come to us? You know, what were they trying to achieve? What were their stated goals? What were their? We we need to know, I think at some point to be nice to know how they came to us. What? What? What form of average tide tied tying if we can track that back and that that*

would not be an open medical. That that would be an active campaign, I would think or it was for sure in suite CRM. You know the the medium source. 576072 292608 Steven Bennett 58:41 There's a lot of no aggregation table. Still. Yeah, medium sourced. Yeah, origin. 576072 292608 Ted Ennenbach 58:45 Yeah. What about the hormone health survey? I mean, I dare to say there's at least 20,000 of our leads. 576072 292608 Steven Bennett 58:56 Yep. 576072 292608 Ted Ennenbach 59:00 I mean, 10 at least 10,000 of our leads completed. 576072 292608 Steven Bennett 59:03 There's like, yeah, there's like ratings for like, sleep energy. Yeah, lots. 576072 292608 Luis Escobar 59:09 Oh well. 576072 292608 Steven Bennett 59:09 Yeah, there's like, probably. I don't know. There's not a ton, I guess, but there's at least like 10 or 11 different survey fields there, with their ratings, one to five what they put. But those are so out of date like. 576072 292608 Ted Ennenbach 59:22 Oh, that's it. Yeah, but that. 576072 292608 Luis Escobar 59:23 Mm hmm. 576072 292608 Ted Ennenbach 59:25 That's it, OM right? 576072 292608 Steven Bennett 59:28 I think this. I think these came from somewhere else. 576072 292608 Ted Ennenbach 59:32 No, that sounds like an intake for. Well, yeah, I mean, it might might be, you know. You you understand what I'm saying, though, right, Steven? Like from the original hormone Health survey, which I think I think still survived. 576072 292608 Steven Bennett 59:43 Yeah, yeah. 576072 292608 Luis Escobar 59:48 No. Oh yeah, the the treatment plan signed. That one looks interesting. Last treatment code, the most recent service, personalized. 576072 292608 Steven Bennett 1:00:12 I'm not familiar with that one. 576072 292608 Luis Escobar 1:00:14 Last treatment code. 576072 292608 Steven Bennett 1:00:17 Yeah. Yep, it's definitely not a column name, but it might be like maybe LC appointment that's last completed. There's also like a last program defining most proc code. Most recent OK, that would be the most recent program defining procedure code. That's the problem with a lot of this is they have like custom definitions that aren't documented anywhere like I have. I have one document that explains along the date fields. And then some of the status fields, but there's lots of other fields that I guess maybe those are. Maybe those are already documented by open dental or active campaign. But I'll. 576072 292608 Luis Escobar 1:01:02 Treatment proc code is what they call it, treatment proc code. 576072 292608 Steven Bennett 1:01:06 Let me see. Yeah, that I don't think that one exists. And. 576072 292608 Ted Ennenbach 1:01:21 Procedure code. 576072 292608 Luis Escobar 1:01:23 Procedure code, yeah. 576072 292608 Steven Bennett 1:01:24 Yeah, just proc code. Yeah, yeah, yeah. There's let me. I'm gonna send you this document with all the date fields and the status fields. 576072 292608 Luis Escobar 1:01:31 OK. But I guess that column wasn't that sample. I I did a test run with. 576072 292608 Steven Bennett 1:01:42 Yeah, it's. S. 576072 292608 Luis Escobar 1:01:54



Current medication RX drug. Bow total account balance. That's good to know how much people have historically spent. 576072 292608 Steven Bennett 1:02:08 I don't know that we've ever used that field, though I think it's it's zero for every single record. I've looked at those before. It's just like the same as that. 576072 292608 Luis Escobar 1:02:14 Oh really? 576072 292608 Steven Bennett 1:02:17 SEST one through 30 est, 31 through 60, they like add up to the the the that balance the total balance. 576072 292608 Luis Escobar 1:02:24 MMM. 576072 292608 Steven Bennett 1:02:37 Open balance now. Dial. 576072 292608 Luis Escobar 1:04:05 So regarding this field creation process inside of Helpspot, I haven't really found a good automated approach for this right? So it's going to be a good portion of it's going to be pretty manual. So I'm wondering who who can assist me basically in that field creation process. 576072 292608 Steven Bennett 1:04:42 I can certainly help with that. 576072 292608 Luis Escobar 1:04:48 OK. Yeah, 'cause, it's. 576072 292608 Steven Bennett 1:04:49 I'll. I'll teach Trent how to do it too. 576072 292608 Luis Escobar 1:04:54 Yeah, it's it can. It's a bit of a process due to the amount of fields we have, but if we take it in batches. We could also like prioritize some of them, but ideally we get them all in there. And then regarding the objects. Should we use like a open dental as like the object name? And just have all open dental records in there and then associate them with contacts. 576072 292608 Steven Bennett 1:06:00 Umm. So. So just be like one object with like the whole database or the tables. 576072 292608 Luis Escobar 1:06:12 Yeah, yeah. 576072 292608 Steven Bennett 1:06:12 Cool. Yeah, that would work if if that if that's an option. 576072 292608 Luis Escobar 1:06:17 It is, yeah. Thinking that could be a cleaner approach because if we just dump a ton of fields on contacts that that don't make sense. 576072 292608 Steven Bennett 1:06:30 Yeah, that, that's that's pretty much what I was thinking of doing just with hubdb just using the database tables and Yep either way though. 576072 292608 Luis Escobar 1:06:30 I think. Yeah, let's let's keep it as like an object. So it's more tangible on the front end. 576072 292608 Steven Bennett 1:06:44 OK. 576072 292608 Luis Escobar 1:06:51 So we're able to create 10. So we have more than enough I think for now. Now do do what? What are the different like categories like for example form submissions that that could be its own object? 576072 292608 Steven Bennett 1:07:16 Yeah, forms. I was thinking like appointments. Like services products. Lab a lab result? Uh. 576072 292608 Luis Escobar 1:07:34 So you we have database tables for all for each of those. 576072 292608 Steven Bennett 1:07:40 OK. So I guess I don't need the app. Well, I don't I guess. I don't. Totally understand. Like the the custom object. Like what would be the the difference? 576072 292608 Luis Escobar 1:07:57 'Cause you can associate one contact which is also an object. 576072 292608 Steven Bennett 1:07:57 Yeah. 576072 292608 Luis Escobar 1:08:05 In Hubspots

framework, all of these are objects, so you can make an association between a contact and their open dental appointment. A contact and their open dental lab results a contact and their you know, open dental, you know. 576072 292608 Steven Bennett 1:08:25 You were. 576072 292608 Luis Escobar 1:08:25 Any other object? 576072 292608 Steven Bennett 1:08:26 You were asked. You were asking if we had tables for all of these that are your saying OK. 576072 292608 Luis Escobar 1:08:30 Yeah, like. So we essentially should we create an identical table on HubSpot for each? I mean we're we're. Right now we have the the limit of 10. No, we have 9 left I guess. And then we can always buy more if we need. 576072 292608 Steven Bennett 1:08:49 Oh, I thought it was ten types of objects that we were allowed to create. 576072 292608 Luis Escobar 1:08:57 Yeah, right here. It says 10. We've already used up one with the Haymarket messages. So that means we're left with nine that we can use. 576072 292608 Steven Bennett 1:09:17 I understand. OK. 576072 292608 Luis Escobar 1:09:19 OK. Are you able to like share with me your screen to see how the database looks just to get get a visual? 576072 292608 Steven Bennett 1:09:26 Yes. So this is the OM aggregation database. And these are all extracts that are created from Tableau. Some of these are still being updated, some have old information, some are empty. But this is the main 1, the ohm aggregation table. It's lots of different. 576072 292608 Luis Escobar 1:10:09 Got it. Is that the? Is that the same as what I just analyzed with AI or does? 576072 292608 Steven Bennett 1:10:15 Yes, this is the sample I gave a sample from this table and then there's also the open medical database which has all of the like. There's some custom tables here which I don't really know why they were created on this data. This database as opposed to the other one, but they were. So there's some custom tables there and then below this is all according to open Dental's database documentation. 576072 292608 Luis Escobar 1:10:30 Mm hmm. 576072 292608 Steven Bennett 1:10:36 That's the link that I just sent in the chat. 576072 292608 Luis Escobar 1:10:39 Mm hmm. Gotcha. I'm trying to wrap my head around how we're gonna do this. Sink. The initial import will be easy, but then just the ongoing sync. Which? Tables do. You do you think we need to be constantly monitoring all of them? 576072 292608 Steven Bennett 1:11:31 No, definitely. Not constantly. I mean like depending on what you're using it for in HubSpot, I mean, I would say most everything would probably be good to be updated like once a day or maybe two or three times a day like. 576072 292608 Luis Escobar 1:11:38 Mm hmm. Got it. 576072 292608 Steven Bennett 1:11:50 Gotcha. 576072 292608 Luis Escobar 1:11:54 Which is like the primary one that you is for sure always gonna be updating in real time. 576072 292608 Steven Bennett 1:12:01 Umm. Maybe. Probably the patient may. Yeah, I guess patient. We would definitely want to have some. Some. Automations built in real time with the appointment table,

and probably the procedure log table. And then. Probably the payment table also. And then there's some related ones that are like the pay split table. 576072 292608 Luis Escobar 1:12:36 OK. Got it. 576072 292608 Steven Bennett 1:12:46 But there's, I mean, I can think of more. 576072 292608 Luis Escobar 1:12:47 Did the appointment table. How is that getting updated? That's basically after the appointment at on location. 576072 292608 Steven Bennett 1:12:58 Umm. So. There's. That that table has a lot of fields that are automatically generated by open dental. A lot of them we don't use also. But yeah, like I mean it keeps track of like if it's treatment planned, if it was broken, if it was moved to the unscheduled list, if it was completed. Like the the like the time. 576072 292608 Luis Escobar 1:13:32 Mm hmm. 576072 292608 Steven Bennett 1:13:33 Ever. Like it's it's. Yeah. 576072 292608 Luis Escobar 1:13:33 Yeah, but this is still. This is the software or the like the the administrator that at at each location are using. 576072 292608 Steven Bennett 1:13:43 Yes, yes. Yeah. So it's just like, yeah, whenever they do anything that makes a change to any of the appointment fields, that would be updated. Yeah, there's. 576072 292608 Luis Escobar 1:13:56 Comes back to this aggregate that you have. 576072 292608 Steven Bennett 1:14:01 Not all. No, not all of it. 576072 292608 Luis Escobar 1:14:09 I guess those that are being updated by the administrators on location those we want definitely syncing, we can identify them. 576072 292608 Steven Bennett 1:14:22 Sorry, I think I'm I'm lost with exactly what you're asking. 576072 292608 Luis Escobar 1:14:25 But with the like the tables that that we know for sure are being constantly updated like by administrators like the the actual like people on location who are are making inputs and changes to the different patient fields et cetera. Yeah we we want like a dedicated sync for. 576072 292608 Steven Bennett 1:14:42 Yeah. 576072 292608 Luis Escobar 1:14:46 That alone. 576072 292608 Steven Bennett 1:14:50 OK. Yeah, I mean. It's a it's just difficult to say exactly which tables because there's a lot of them that are like connected on open dentals back in that I just don't know like exactly. Updating a field in this table will update another field in another table so. 576072 292608 Luis Escobar 1:15:11 OK. 576072 292608 Steven Bennett 1:15:12 Like, yeah. And like summer definition tables where like. They store appointment types, maybe or. Like. Definitions of allergies with a allergy numb or allergy number? Yeah. Which those wouldn't be need to be updated as frequently, but. 576072 292608 Luis Escobar 1:15:38 No. 576072 292608 Steven Bennett 1:15:39 The. Additions would additions to those tables I guess would be yeah, it's hard. It's hard to say. I can definitely tell you the features that we use the most, I guess. And there's definitely some tables that we don't use at all that might be helpful information. 576072 292608 Renzo Mogrovejo 1:17:46 Louis, I've been thinking of. Including some some of the fields that are not part of the patient itself. On the contact.

If we consider that they are important. For the. For what we want to in in the business, you know. Because there are a lot of tables and we got a limit of custom updated that we can create on HubSpot. But yeah, we can do something like that. 576072 292608 Luis Escobar 1:18:29 Yeah. I mean, I think the to get an increase, it's not too much. 576072 292608 Renzo Mogrovejo 1:18:36 Mm. 576072 292608 Luis Escobar 1:18:38 Custom objects. To find 10 more objects and store 1,000,000 more records. Across all your objects in HubSpot. Maximum capacity of 50 million custom objects records. 576072 292608 Renzo Mogrovejo 1:19:05 Records OK. 576072 292608 Luis Escobar 1:19:07 Per account. 576072 292608 Renzo Mogrovejo 1:19:09 Per account. 15 mill. 576072 292608 Luis Escobar 1:19:12 50,000. 576072 292608 Renzo Mogrovejo 1:19:14 15,000, OK. 576072 292608 Luis Escobar 1:19:15 Yeah, but here we. Can. Yeah, we can buy as many objects as some objects as we want. 576072 292608 Renzo Mogrovejo 1:19:24 OK. 576072 292608 Luis Escobar 1:19:24 I mean it. So we had nine more. We may need to buy another set of 10 to bring us up to 20. 576072 292608 Renzo Mogrovejo 1:19:25 Sorry. Mm hmm. 576072 292608 Luis Escobar 1:19:32 I mean, 30, I don't think so. 576072 292608 Renzo Mogrovejo 1:19:36 At least we can create the objects that depends on the operation. Right. 576072 292608 Luis Escobar 1:19:49 The objects that depend on the operation. 576072 292608 Renzo Mogrovejo 1:19:53 The daily. The daily operation, for instance. 576072 292608 Luis Escobar 1:19:56 Yeah. 576072 292608 Renzo Mogrovejo 1:19:59 We will need the patient. But we already have the contact on hapspot. We can't create or activate the appointment. Because we we use a lot identity. Maybe payments? I don't know. There is a. A building. Entity or already created entity that relates to payments? Umm, what else? 576072 292608 Luis Escobar 1:20:43 Yeah, definitely. So tell me more about payments. What those are transactions. That are happening through the OM system. 576072 292608 Renzo Mogrovejo 1:20:56 Yeah, right now we are receiving payments on Hotspot. The payment processor is a A HubSpot payments. But behind is a stripe. 576072 292608 Luis Escobar 1:21:13 Yeah, yeah. 576072 292608 Renzo Mogrovejo 1:21:15 But. 576072 292608 Steven Bennett 1:21:15 And then in office it's through like a yeah, built in X called X charge to pay connector thing. 576072 292608 Luis Escobar 1:21:23 But yeah, how do we get that data in HubSpot? So, like we, we should be able to log into HubSpot and see how much each location is generating and revenue. 576072 292608 Steven Bennett 1:21:33 Would be that would be in the payments table. 576072 292608 Renzo Mogrovejo 1:21:35 Yes. Yeah, in Habsburg. 576072 292608 Luis Escobar 1:21:47 And that's and the processor is that. What's the name of the processor? 576072 292608 Renzo Mogrovejo 1:21:54 A HubSpot. 576072 292608 Steven Bennett 1:21:54 X charge. But yeah, we've also started creating payments that were made in HubSpot so that

they would be mirrored in open dental like the, I guess because we were taking the majority of payments through open dental. So we wanted them all to be like reconciled there from an accounting purpose like so we could Commission properly. Yeah. 576072 292608 Luis Escobar 1:22:20 I see now. 576072 292608 Steven Bennett 1:22:20 That was that was the. That was the objective. And yeah, and through HubSpot, what Renzo was saying, yeah, HubSpot payments and stripe. 576072 292608 Luis Escobar 1:22:30 Correct. Yeah, I know. 576072 292608 Ted Ennenbach 1:22:30 We're not. We aren't using MINDBODY at the Springhurst to collect money. 576072 292608 Steven Bennett 1:22:41 We are, yes. 576072 292608 Luis Escobar 1:22:45 OK. Should we continue doing so or should we try to like create more of a unified approach like my my ideas like you? You log into the members portal online or on the app or on location. We have your profile. We have your credit card on file. You know, it's A to unified experience. We don't have to ask you again to put your card on file. 576072 292608 Steven Bennett 1:23:18 We we do have a. 576072 292608 Luis Escobar 1:23:18 I think. 576072 292608 Steven Bennett 1:23:19 We have a card on file in this like. If you come in into the office before they have your card, they will have your card on file through X charge. But yeah, it's it is weird that we like if you book online, we have to ask you again for your card. 576072 292608 Luis Escobar 1:23:38 For sure. Yeah, the idea is that or vice versa. You come for an in person, visit you leave, and two days later you get a phone call. And then you get sold on the membership and then now you know, we just charge your card on file. So I think to achieve that we want to have Stripe as. Our center of all transactions. Sending that data to HubSpot and. Any other systems that need that data? 576072 292608 Steven Bennett 1:24:27 OK. So. So we should kind of route, I guess pay. Ments. Made through X charge to stripe so that they're like kind of charted there or? 576072 292608 Luis Escobar 1:24:41 Yeah, just need to get a more of an understanding of what that looks like for like the you know the the manager at one of these locations like where, where are they logging in and what are they clicking? 576072 292608 Steven Bennett 1:24:54 No. They are using like a lot of the built in reports. To to open dental. Some more than others, but yet like the kind of the goal of some of the like, we were trying to get, we've been working on a ZAP that created all the like. For example, the gift up gift card payments in open medical so that we could equivocate like all the payments we've actually received with what we want to pay providers for, for commissions. That was the same goal with the HubSpot payments, but it kind of sounds more like. Now we need to be doing. The reverse. Where payments are moving from open medical to stripe and. Being analyzed in hotspot, but I think they also need to still be. 576072 292608 Luis Escobar 1:25:52 So there's another layer also. 576072 292608 Steven Bennett 1:25:52 Like. 576072 292608

Luis Escobar 1:25:54 It's like the the e-commerce engine, right? Which is we we have a WooCommerce running at the core of it. Are you familiar with newcomers? 576072 292608 Steven Bennett 1:26:08 A little bit. I haven't really worked in it, but we were using it before. 576072 292608 Ted Ennenbach 1:26:10 Yeah, I mean. We we use it for, yeah. 576072 292608 Luis Escobar 1:26:14 Yeah. So yeah, WooCommerce would be like at the very core, essentially you know all product Sku's. All services would be, you know, stored inside of WooCommerce and then also synchronized with HubSpot. A user walks into the a location they're asked to pay. They're probably maybe shown an iPad and then they submit their payment and what they're doing in that moment is submitting their payment through a WooCommerce checkout. Umm. Same deal with the online experience. You're signing up for a membership. You're signing up to that WooCommerce engine. Stripe is taking that payment. This data is being documented in HubSpot. Do we then need to send that data to open medical? We can, if we need to. As for gift cards and discounts and coupons and things of that nature, we use Hubspot's native discount and coupon features. There's some pretty good like. Like. A giveaway plugins and and raffle plugins also that they keep track of these specific types of vouchers. 576072 292608 Steven Bennett 1:27:50 Yeah, I mean, I guess the only important part of having a payments in open medical is like just associating procedures with payments. If there's a, so if the in HubSpot and we can train like the practice managers. To do that instead, that's. 576072 292608 Luis Escobar 1:28:15 Yeah, we we could build like a simple a simple custom solution just for the managers, right? 576072 292608 Steven Bennett 1:28:15 Not not possible. 576072 292608 Luis Escobar 1:28:20 It would be like a custom website or dashboard where they log in, they see, you know, a few options to select patients and services and collect payments. 576072 292608 Ted Ennenbach 1:28:34 But yeah, the patient record would have to be reflecting that there is no open balance or whatever pay payment history has been made. So as long as it's a synchronous type effort to. A. 576072 292608 Luis Escobar 1:28:53 So yeah, that we can have a a sync a sync happening between the WooCommerce transaction ID. Right. That's the unique identifier on that particular transaction. What the what the balance was, what the amount paid was. What the you know, remainder is and then have that synchronized with the open dental record using an ID some unique identifier. Or e-mail. Or anything really. 576072 292608 Ted Ennenbach 1:29:27 That that could potentially solve your problem. Steven, with regard to inventory, I say yours. I mean our our problem. Where? Where? We could be your location specific inventory as well. 576072 292608 Luis Escobar 1:29:48 Yeah, there's some really great WooCommerce services that that are made for like you know, multi location situations and you can synchronize inventory across all locations. 576072

292608 Steven Bennett 1:30:05 I know we were looking into trying to find like a inventory e-commerce point of sale solution like HIPAA was just a concern there again just with. Unifying their payment like personal patient data with like the procedures they're paying for or something. But yeah, if that's not a concern, then that's that's sounds good. Lab. Yeah, but sounds great. 576072 292608 Ted Ennenbach 1:30:36 Yeah, but this is a 1 to one. This isn't like we were building a custom. 576072 292608 Steven Bennett 1:30:52 It's true. 576072 292608 Ted Ennenbach 1:30:53 It would be outside. I mean, we were creating something that was outside the loop where this is a completely closed loop. 576072 292608 Steven Bennett 1:30:59 Yeah, yeah, I know. Shop Shopify just wasn't HIPAA compliant and that was what we were looking at. For. 576072 292608 Luis Escobar 1:31:10 Yeah, I mean. 576072 292608 Ted Ennenbach 1:31:11 I'm sharing sharing this screenshot of an e-mail. This is our springhurst location. It's the only one that runs a software called Mind body. And and it's it's just way superior as far as ease of scheduling inventory all that. 576072 292608 Luis Escobar 1:31:31 Yeah. 576072 292608 Ted Ennenbach 1:31:32 I'm only bringing this up because we ideally want HubSpot to to do all of this. You know, I mean, so, so. So in one column, she said. This is what mind body does well in the other column. This is what open medical does better you know, and so. And so it was kind of like, hey, how can we merge the two together? Basically creating what you call. A unified experience and use the best of both. It sounds to me like we're we're doing that with HubSpot. I guess is what I'm trying to say. 576072 292608 Luis Escobar 1:32:14 But you bring up a great point though, I mean. If the you know the advantage of using Mindbody, you know or or significant enough you know it may make sense to utilize mind body and. Synchronize that data as well. Is there, but is there also like a lot of things in mind body that you don't use and that you're paying too much for? Or does it not make sense at scale? 576072 292608 Ted Ennenbach 1:32:47 It doesn't chart. It doesn't chart. I mean, it does. There is no E prescribing. It's not medical enough, so it doesn't, you know, I mean it it falls short. 576072 292608 Luis Escobar 1:33:01 Could fall short. I gotcha, yeah. 576072 292608 Ted Ennenbach 1:33:01 So yeah, it does it. It doesn't chart the way the IT doesn't create the soap. Soap notes it doesn't allow for E prescribed scribing. 576072 292608 Luis Escobar 1:33:09 Mm hmm. Yeah. 576072 292608 Ted Ennenbach 1:33:15 It probably does. The forms in consents fine. You know, she has put that, you know, I mean, because quite frankly, the forms and consents and open dental are shed. 576072 292608 Luis Escobar 1:33:28 Mm hmm mm hmm. 576072 292608 Ted Ennenbach 1:33:30 So yeah, I think Stephen would agree with that, right. 576072 292608 Steven Bennett 1:33:34 Yeah, it's awful setting those up. They should not take. 576072 292608 Ted Ennenbach 1:33:39 And those really should be just web

forms. I mean, you know, I mean those are secure web web forms. I mean, you know, nice looking. 576072 292608 Luis Escobar 1:33:46 Yeah. Yeah, as long as we like, you know, control the servers and the data, I feel like we have pretty much all the freedom we need, right? You know, the whole thing was Zapier. It's just 'cause, you know Zapier than the cloud with NAA, we're gonna have it sitting in on location. Shopify is another platform that you technically don't own. It's it's you're leasing that technology on somebody else's server, right? WordPress is gonna be something that that sits on our own server. We're gonna make our own server HIPAA compliant, so you know can make all the forms we want. So although mind body sounds interesting, I think we can probably create something that is just as good, and if not better, and then also won't constrain us in the future when we have other creative ideas. 576072 292608 Ted Ennenbach 1:34:45 Well it it seems like our our word WordPress site will allow both the providers and the clients to be able to see their schedules, their hop authorities. I mean, if we set it up right, right, I mean. 576072 292608 Luis Escobar 1:35:02 Correct. 576072 292608 Ted Ennenbach 1:35:03 My my body is just so nice. We know you're out at the club and you're at a friend comes up and says, hey, I want to book this. But you know, you get the information and on your iPhone. 576072 292608 Luis Escobar 1:35:08 Mm hmm. 576072 292608 Ted Ennenbach 1:35:16 You can literally do do that in. My body was built to be a user friendly. You know, it's used by big companies like like. I don't know. Like. Orange theory. You know big. It's a fitness kind of app, but but it's used by by by, you know, chains of a huge. 576072 292608 Luis Escobar 1:35:41 Yeah, that's. 576072 292608 Ted Ennenbach 1:35:47 Franchise change so. 576072 292608 Luis Escobar 1:35:49 Yeah, that's what I know them most from. Is like the fitness industry, so. 576072 292608 Steven Bennett 1:35:54 Open Dental does say open dental does have an app where you can book somebody from your phone, but nobody uses it so. 576072 292608 Luis Escobar 1:35:54 But that that was. Now we're going to have our own, and it'll be the a new life app and. 576072 292608 Ted Ennenbach 1:36:07 Right. 576072 292608 Steven Bennett 1:36:07 Yeah. 576072 292608 Luis Escobar 1:36:13 It's also going to the the iOS app and the Android app and the website. They're all going to be powered at at the core by, you know, these open source technologies such as Na WordPress. And you know, we'll have full control of all the HIPAA things that we need to cover. During the course of this last like 10 minutes, I had Manus create a workflow that were, I think, 90% sure. This is like in the word press. Usually does open dental to Hoseva integration package. So here's this Jason file Na workflow advanced. Jason, we're gonna just import that to NA 8 and it should provide us with the integration that we need. Here this would be. We have API credentials for open dental. 576072 292608 Steven Bennett 1:37:56 Yes. 576072 292608 Ted Ennenbach



1:37:58 We are running open dental. Steven, it's not we. We've created our own or there's local servers being backed up right periodically. 576072 292608 Steven Bennett 1:38:11 We have a local server and it's like run remotely through middle tier. At the clinics or at each work station rather. 576072 292608 Ted Ennenbach 1:38:25 I just wanted. 576072 292608 Steven Bennett 1:38:26 That's my understanding. 576072 292608 Ted Ennenbach 1:38:27 Is it? Well, it needs to be. We we need to know exactly from, from, from from. Andrew. I think it's important that Louis know exactly how that's set up. 576072 292608 Luis Escobar 1:38:47 So you have backups. For for. 576072 292608 Steven Bennett 1:38:52 Yeah, definitely. 576072 292608 Luis Escobar 1:38:54 OK. 576072 292608 Ted Ennenbach 1:39:35 Guys, I've got a six 6:00 AM flight and there's things I've got to pick up. When I get to the Home Office, I can log back back in if if you're still on. But if you need me, can you? Can you all send me a text or something? 576072 292608 Renzo Mogrovejo 1:39:57 Yeah. No problem. 576072 292608 Ted Ennenbach 1:40:01 OK. 576072 292608 Luis Escobar 1:40:02 Problem sound good? 576072 292608 Renzo Mogrovejo 1:40:02 Maybe we will continue. Not only today, but tomorrow. 576072 292608 Luis Escobar 1:40:11 Yeah, we got a few things to cover, but. What I just shared with you guys, I think is gonna serve as our boiler plate template for how we're gonna do the data sync with NAA between open medical and HubSpot. 576072 292608 Renzo Mogrovejo 1:40:31 Awesome. Do we need? Do you need the APA credentials? 576072 292608 Luis Escobar 1:40:40 Not immediately. Not gonna be touching that and not not tonight at least. 576072 292608 Renzo Mogrovejo 1:40:45 OK. 576072 292608 Luis Escobar 1:40:46 Yeah. Well, what I would like to get my hands on is just those. Full like CSV exports. That are that are really comprehensive and have all the contacts and all the rows and columns. The faster I can get my hands on that and then we can, well, we already have a pretty good portion of those columns. With that sample you gave me, but then we can then immediately begin creating those objects and fields inside of HubSpot. Let's just map out. You know what those objects are gonna officially be called, and and then we'll extract the fields from with the AI. 576072 292608 Steven Bennett 1:41:32 OK. So you just want a CSV of that one table or the entire like database open database? 576072 292608 Luis Escobar 1:41:43 The. The entire omaggregation database. 576072 292608 Steven Bennett 1:41:49 OK. It might take me a few minutes to get to this. 576072 292608 Luis Escobar 1:43:34 So how many records are are gonna be in there? 576072 292608 Steven Bennett 1:43:40 Umm. A lot. It's hard to say. 576072 292608 Luis Escobar 1:43:48 Ballpark. 576072 292608 Steven Bennett 1:43:49 If you're talking procedures, the sheet defs. Yeah, I mean there could be like 10 tens of 1,000,000 out in the sheet def table. 576072 292608 Luis Escobar 1:43:59 OK. 576072 292608 Steven Bennett 1:44:00 In this, yeah. 576072 292608 Luis

Escobar 1:44:02 That's perfect. That's actually perfect. 576072 292608 Steven Bennett 1:44:07 But those are like some of those are fields like there's tables. That. For every field in every form, like there's a table. Yeah, there's a table that has every field and every form. And like what type of field? Yeah. 576072 292608 Luis Escobar 1:44:25 Hmm. Shall we break this up instead of using just the aggregate? 576072 292608 Steven Bennett 1:44:42 So. So there's like two separate databases, the OM aggregation database and then the open medical database that the one that I'm talking about is on the open medical database. You're just interested in om aggregation or both. 576072 292608 Luis Escobar 1:44:55 I mean, I would say both, yeah. 576072 292608 Steven Bennett 1:44:57 OK. Yeah, that's that's. Maybe it makes sense to keep them separate like because the OM aggregation database basically uses a bunch of the tables from the open medical database and just like pulls from those kind of selectively. 576072 292608 Luis Escobar 1:45:17 Gotcha. Yeah. This makes sense to keep it separate. 576072 292608 Steven Bennett 1:45:23 And that's something to keep an eye on too. I think that there's gonna be some fields, I guess. In both databases that are the same that I guess, yeah. 576072 292608 Luis Escobar 1:45:38 And the the other day, I brought up a question regarding like the telehealth provider. It is. 576072 292608 Steven Bennett 1:45:49 Tell her. Oh, yeah. So we're we're doing that. It's basically like the the purchase and schedule through payment and scheduling links on HubSpot and then we have like a custom integration basically that's creating them. The appointment in open medical and then also on a outlook calendar. And we have like the teams. Or the teams. Permissions and enabled where the. The meeting scheduler and HubSpot will just automatically create a teams meeting if we have that turned on. So that's that's how we're doing telehealth and yeah. 576072 292608 Luis Escobar 1:46:30 Gotcha. Gotcha. And what's is that the way we want to keep doing things or is there any? Uh. 576072 292608 Steven Bennett 1:46:38 Well, yeah, I don't know 'cause you you mentioned a lot about changing over to the Google Workspace and really I mean really the only reason we went with teams for our telehealth was just because we were on Microsoft Workspace and that was already included. 576072 292608 Luis Escobar 1:46:54 Yeah. 576072 292608 Steven Bennett 1:46:57 In. 576072 292608 Luis Escobar 1:46:57 Yeah, I'm wondering like, what is it like? 576072 292608 Steven Bennett 1:46:58 Easy. 576072 292608 Luis Escobar 1:47:00 Is it you guys basic you're not using like a a specific telehealth software that was made just for providing telehealth services, right? 576072 292608 Steven Bennett 1:47:10 No, just teams. 576072 292608 Luis Escobar 1:47:14 OK. 576072 292608 Steven Bennett 1:47:15 And yeah, that that workflow from like purchase. To appointment time is. I mean it was kind of cobbled together, I will say. 576072 292608 Luis Escobar 1:47:26 Yeah, I like it. Cool. Actually, that's cool.

'Cause then that means we have the freedom and flexibility to do kind of something a little more advanced. So yeah, I'm. I'm picturing you log into enulife.com and then you begin your telehealth session. In the form of a zoom call, basically, and it gets documented inside of your. WordPress user activity. 576072 292608 Steven Bennett 1:48:01 OK. 576072 292608 Luis Escobar 1:48:11 The like. The whole video connection doesn't have to be like HIPAA compliant or something or. 576072 292608 Steven Bennett 1:48:19 I think. Teams is HIPAA compliant. 576072 292608 Luis Escobar 1:48:23 I see. 576072 292608 Steven Bennett 1:48:26 I'm pretty sure. 576072 292608 Luis Escobar 1:48:28 I'm guessing zoom is 2. Yep. 576072 292608 Steven Bennett 1:48:32 Yeah, I think so. 576072 292608 Luis Escobar 1:48:33 Oh awesome. I guess I'm just. 576072 292608 Steven Bennett 1:48:33 We had used zoom for that one tonight. 576072 292608 Luis Escobar 1:48:35 I'm overthinking this, but yeah, we can just create our own simple Ted health solution through the private portal we're gonna create. And then that. Data also gets synchronized inside of HubSpot. We'll probably create a object called telehealth. And then all the fields related to telehealth inside of there. So I established a new Google Workspace account. Under the domain in ulike.com. I created one administrator user right admin@anewlife.com. That's basically gonna serve as like the the master administrator for all these new systems, right? So I'll share those. You know logins and and credentials with yourself, with both of you guys, I think also create both of you your own Google Workspace, right? I mean, eventually the whole team will get it, but just during this whole development phase. So they were all synchronizing through for Google Drive for example. Let's let's start putting all of our content, all of our data inside of a Google Drive. 576072 292608 Renzo Mogrovejo 1:50:43 Awesome. 576072 292608 Steven Bennett 1:50:43 Sounds good. 576072 292608 Renzo Mogrovejo 1:50:45 Will it be? Will the world Google Workspace will replace the one that we have? Microsoft. 576072 292608 Luis Escobar 1:50:58 Yeah, eventually there will be no need for Microsoft. Forgot what they call it. Drive. I think it is as well. Also, I know you guys have a Dropbox account and there's no need for that. Also, we have to Google Drive. 576072 292608 Renzo Mogrovejo 1:51:17 Oh yeah. 576072 292608 Luis Escobar 1:51:28 Or the stripe account do we? Do we have the administrator logins for that? 576072 292608 Steven Bennett 1:51:40 I do not, but definitely either like Brian or Ted. Maybe John has it. 576072 292608 Luis Escobar 1:51:47 Don't don't have that. OK. Sorry, I shared the document regarding those initial fields, but I'll I'll wait for that aggregate. File and then I'll put together the game plan for like the initial objects and fields that we need to get created. And then between the three of us. For I don't know we if you guys have like, a virtual assistant, we I have one that we can also. Use and then get some of this. Bulk up the fields created. How many fields is it? Several 100 it

seems. 576072 292608 Steven Bennett 1:52:44 In the OM in that table. Yeah. At least like I don't. 150 or so, think. 576072 292608 Luis Escobar 1:52:56 OK, it's not too bad. 576072 292608 Steven Bennett 1:53:00 But that's just. Yeah, that's just the the sequel table. 576072 292608 Luis Escobar 1:53:27 And you guys haven't have any experience of NA 8 yet. 576072 292608 Steven Bennett 1:53:33 No. 576072 292608 Luis Escobar 1:53:35 Yeah, I highly recommend it. Just like you know, spend 20 minutes on YouTube. It's it's really incredible what to do. And are you guys still using the the tab do table? 576072 292608 Steven Bennett 1:54:32 Pablo yeah. 576072 292608 Luis Escobar 1:54:33 Yeah. 576072 292608 Steven Bennett 1:54:35 Yes, we use Tableau. We basically been using it. For creating lots of different reports dashboards, but the biggest uses for the patient story that we have that makes recommendations based off of. Their their medical history, their family history, their symptoms. Shows like their lab levels over time. That is through Tableau right now. Kinda looking at other ways to redo that in ways that might be more exportable into like a patient portal or an app or something. Because there's like a lot of interactive features that just like when you export the PDF from there then it leaves out. 576072 292608 Luis Escobar 1:55:23 Mm hmm. 576072 292608 Steven Bennett 1:55:23 That hopefully we can add to, but. Yeah, that's that's that's based on a few different tables that are related. It's been a focus of mine daily, documenting how all of those are related. Figuring out and then documenting how all those related other. 576072 292608 Luis Escobar 1:55:46 Gotcha. Gotcha. Yeah, essentially. You know, eventually we'll have everything in the portal, right? Yeah, this this open dental software looks ancient. Stuck here, yeah. If we if we really don't need it, then we don't have to use it. You know, I think. If the office can have something as sophisticated as mind body or or or even better. They'll be happier. 576072 292608 Steven Bennett 1:56:40 Yeah, it's definitely something we've talked about in the past. It's just like open dental. Like I don't know. I I did not have the. Confidence. I guess that making that change to an EMR like just changing the EMR and paying another \$5000 a month was gonna help raise the top line. Maybe it would a little bit, but I don't know if that was like the game changer at that time. So I think we just kind of stuck with open dental out of almost paralysis by analysis, but. 576072 292608 Luis Escobar 1:57:13 Yeah. 576072 292608 Steven Bennett 1:57:18 It's also very cheap, and it you know, as you can see, it has a lot of flexibility. You on the back end, what we can do with it. 576072 292608 Luis Escobar 1:57:19 No. For sure. For sure. Yeah, it served its purpose. But yeah, we we can still be economical. You know, if we use our own systems that are open source like you know WordPress and NAA stuff like that. It gets expensive once you start getting logged into the these other service providers ecosystem, right? Hubspot's the only one that kind of make an exception for but. 576072 292608 Steven

Bennett 1:57:52 Yeah, that was another thing is a lot of these places, one of us like modmed 1. 576072 292608 Luis Escobar 1:57:53 W. 576072 292608 Steven Bennett 1:57:56 We were looking at wanted us to sign a four year contract and then they download like like all right, three years. It's like that would have added up to like I don't know, 600, eight, \$100,000 over that time. 576072 292608 Luis Escobar 1:58:08 Yeah, yeah, I bet. You guys made the right choice. But yeah, at this point I think I got what I need for now. Got quite some work to do, but if you have you can send that. CSV when it's ready. You think you'll be able to send it tonight or? 576072 292608 Steven Bennett 1:58:31 Yeah, I'm gonna get that finished up. Yeah. And then send that to you before I get out of here. 576072 292608 Luis Escobar 1:58:36 OK. Great. It might be too big to send in an e-mail, so you might need to upload it somewhere. 576072 292608 Steven Bennett 1:58:44 OK. 576072 292608 Luis Escobar 1:58:45 But yeah, you let me know. 576072 292608 Steven Bennett 1:58:49 Will do. See what's the best option there. Now, yeah. Do you have a suggestion for what was the best place to put this? 576072 292608 Luis Escobar 1:59:00 I mean. Google Drive even or? It should be able to upload it. Unless it's not, then you might need an FTP. I I could provide you an FTP. 576072 292608 Steven Bennett 1:59:16 Let's see. OK. It's dumping right now, so I'll have to. I don't take a while. It doesn't look like it's loading very fast so. 576072 292608 Luis Escobar 1:59:32 Yes, I know it sounds like it. Yeah, just, yeah. Keep me in the loop. Send me a teams message or an e-mail, I know. 576072 292608 Steven Bennett 1:59:39 OK, it may not be tonight just based off of how quickly this is not loading. So yeah, I don't even see the progress bar yet. 576072 292608 Luis Escobar 1:59:47 Close. Up. 576072 292608 Steven Bennett 1:59:49 Like that's. 576072 292608 Renzo Mogrovejo 1:59:50 Yeah. 576072 292608 Luis Escobar 1:59:52 No ma'am. OK. Yeah. Keep me in the loop and hopefully it moves. 576072 292608 Steven Bennett 1:59:58 OK will do. 576072 292608 Luis Escobar 2:00:00 All right. 576072 292608 Steven Bennett 2:00:01 Continuous conversation tomorrow maybe? 576072 292608 Luis Escobar 2:00:04 Yeah, yeah, yeah. Tomorrow I'll touch base with you guys. 576072 292608 Steven Bennett 2:00:07 All righty. Well, I'll get that to you when I can, but you all have a good night. 576072 292608 Luis Escobar 2:00:14 Thanks. Appreciate it. You too. 576072 292608 Renzo Mogrovejo 2:00:17 Awesome. Nice. Thank you. See you tomorrow. 576072 292608 Luis Escobar 2:00:21 Bye now. 576072 292608 Steven Bennett 2:00:21 Yep. 621792 274320 Ted Ennenbach stopped transcription