SANNIDHI

CASE STUDY · INDUSTRY SOLUTION: WELLNESS PRACTITIONERS

Unified Practice, Charm or Jane: choosing a system someone else can run

Tao Performance Acupuncture is a four-room practice run by one practitioner. It compared staying on Unified Practice against moving to Charm or to Jane, chose Jane, and is moving now. Alongside the move, former patients are hearing from the practice again, and a website that was losing calls has been repaired.

PRACTICE	DISCIPLINE	SCOPE	STATUS
Tao Performance Acupuncture	Acupuncture	System choice, migration, patient outreach, website	Move under way

01 The situation

One practitioner, four treatment rooms running at once, and a back office he runs alone.

Every treatment code was entered twice: once in the chart during the visit, and again in billing afterward, often hours later. Insurance benefits for dozens of patients lived in a free text field, updated whenever somebody remembered to. Get one wrong and the practice treats a patient and never sees a dollar for it.

The deeper requirement came from where the practice is going. The practitioner is moving toward fewer, longer treatments and, over years, toward teaching apprentices who will run the work alongside him. So whatever replaced the old system had to be learnable and supportable by someone other than him. A system only its owner can run is a system that cannot be handed over.

7 years
of appointment history read before any system was discussed

3
systems compared, alongside the case for changing nothing

11
website phone links found dialling the wrong number, all corrected

15
business listings audited across the web

02 Reading the history before recommending anything

Seven years of appointments were read month by month before anything was recommended: how the week actually runs, how new patients arrive, and which former patients stopped coming and when.

A calendar with quiet days on it looks like a practice that needs more patients. This one does not. Those days are kept on purpose, and because four rooms run at once, the numbers describe visits rather than hours. An hour with one name in the book is not an hour going to waste. The first reading of the data treated the quiet days as spare capacity, and it was corrected with the practitioner before it shaped anything.

The room the practice does have is in appointments it wins and then loses: cancellations on the busy days, which is demand that has already arrived. That calls for a different answer from going out to find more patients, and it set the order of everything after.

03 Staying on Unified Practice, or moving to Charm or Jane

The comparison was written in plain terms, with the case for changing nothing included and weighed honestly. The practitioner chose with it in hand and spent no time of his own on vendor research.

Two of his requirements decided most of it. Codes have to travel from the signed chart note onto the claim without being written a second time. And a patient's coverage has to be checkable at the moment they book, not discovered weeks later in a denial. Jane does both natively. Its eligibility check runs in real time, from the booking, in one click.

The third requirement changed an earlier recommendation. Charm had been the first choice. Tested against the apprentice question, how a new practitioner gets help when something goes wrong, the support model mattered more than any feature. Where help comes only by email, the owner becomes the help desk, which is the opposite of stepping back. The recommendation moved to Jane, and the reasons were written down so the decision can be revisited on facts rather than memory.

WHAT THE NEW SYSTEM DOES ON ITS OWN, AND WHAT STILL NEEDS BUILDING

Jane handles a good share of the work natively: codes from the note onto the claim, real-time eligibility, claim submission, rejection reasons readable in plain language with a correct-and-resubmit path, waiting list backfill that texts the list when a slot opens, reminders, and a Mailchimp sync that carries each patient's last visit.

What it does not do is send its accounting to QuickBooks. Jane has no QuickBooks API, which its own team confirmed plainly. So reconciling payments and following up denials are built from Jane's scheduled exports rather than a live feed. Knowing that before signing is the difference between a plan and a surprise.

04 Moving the history without losing it

A new system that starts blank asks a practitioner to remember seven years of patients. So the chart history is being turned into a short written summary per patient and loaded before the switch. The practitioner asked for this himself: a summary in front of him before he opens the treatment room door, with the chief complaint, the last note, the treatment principles used last time, and history such as herbs prescribed.

Herbs are changing too. Fulfilment moves to drop shipping through Fullscript, which Jane supports, with payment from a health savings account, and the stock on the front office shelf goes away.

05 A date with a test in front of it

The move carries a full end-to-end test before go-live. If the test does not run clean, the date moves rather than being forced. And there is a line it will not cross: the changeover never lands on the holiday schedule and the January insurance deductible reset at the same time, which is two sets of confused patients and one front desk.

The old system stays in place until the new one has been proven, and the claims account is opened early, because approval from each insurer to receive payments electronically can take up to a month.

06 Former patients hear from the practice again

Former patients had simply stopped coming, with nobody at the practice free to notice. The first answer was not an automated campaign. It was letters.

Each is written in the practitioner's own words and sent one at a time from his own mailbox, plain text, with no header image and no branded button, so it arrives as a person writing rather than a campaign landing. Every name on the list was read aloud and approved by him first, and some came off. He presses send himself, so each letter carries nothing but his name. A reply or a phone call books the visit, and the online booking link sits alongside for anyone who prefers it.

Before the first letter could go anywhere, the mail authentication the practice sends under had to be published and verified against live DNS, or the letters would have landed in junk folders. The letters go out in waves, and the results of the first waves are read before anything is automated. Prove the message by hand, then build on it.

07 The website, repaired where it was costing calls

Every phone number on the site dialled the wrong number. All eleven phone links displayed the right number and called a different one, on a site patients use to find the practice. Every one was corrected and checked on the live site. The email link was corrected, leftover demonstration pages from the website theme were retired, pinch to zoom was restored on phones, and broken images and old domain references were repaired.

The site also now describes itself properly to search engines and AI assistants. It presents as the practice rather than as one person, with structured data on every page carrying the address, the phone number, the services, the areas served, and a way to book. Nine pages missing a search description got one, each written after reading the page.

Off the site, fifteen business listings were audited. Several directories publish hours that disagree with the practice's own Google profile, and one map listing appears to have merged the practice with a different business at a different address.

Those corrections go through the practice's own accounts, and a change of business name on Google is deliberately held until after the move, because it triggers a review of the listing.

What a practice owner would not know to ask for

Every item below was found or prevented by us, not requested. None of it appears on a practice software sales page.

- **Tap every phone link on the website.** A link can show the right number and dial another, and nobody inside the practice ever taps their own.
- **Read the calendar before believing it.** Quiet days can be a choice, and a plan built on filling them spends a year aiming at the wrong thing.
- **Count visits, not hours, when rooms run in parallel.** Otherwise capacity looks larger than it is.
- **Weigh the case for changing nothing.** A comparison that leaves it out is a sales document.
- **Choose the system someone else can run.** If the owner is the only person who can get help, the owner becomes the help desk.
- **Ask what the new system cannot send.** Jane has no QuickBooks API, and planning around that before signing costs nothing.
- **Open the claims account early.** Electronic payment approval from each insurer can take a month.
- **Keep the changeover away from the deductible reset.** Two sources of patient confusion in one month is one too many.
- **Authenticate the practice's mail before the first letter.** Without it, a heartfelt note lands in junk.
- **Let the practitioner approve every name.** He knows things about each person that no list holds.
- **Check the listings, not just the website.** Directories keep publishing hours and addresses long after anyone remembers setting them.
- **Change a business name on Google after a move, not during.** A name change triggers a review of the listing, the practice's strongest asset online.

08 Where it stands

Jane is chosen and the move is under way, with the test ahead of go-live and the old system still in place. Letters to former patients are going out in the practitioner's own words. The website has been repaired and now describes the practice correctly to search engines and AI assistants, and the practice's listings across the web have been audited.

09 What comes next

At go-live, reminders and the waiting list switch on in Jane, so a cancelled slot is offered to someone already waiting. **Then** the insurance work, in a fixed order: checking coverage, submitting claims, recovering denials, reconciling payments, and the reporting that shows the practitioner all of it in one place. **Alongside**, the letters continue in waves, and once the message is proven by hand it becomes a seasonal program that runs on its own.

> HOW SANNIDHI WORKS
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> Discovery before build, every time. Systems that fail loudly rather than quietly. Nothing automated that a practice has decided should stay human. And a written record of every decision, so the practice owns what was built rather than depending on whoever built it.

Practice details in this study are described with the practice's permission. No patient information and no figures about the practice's business appear in this document.