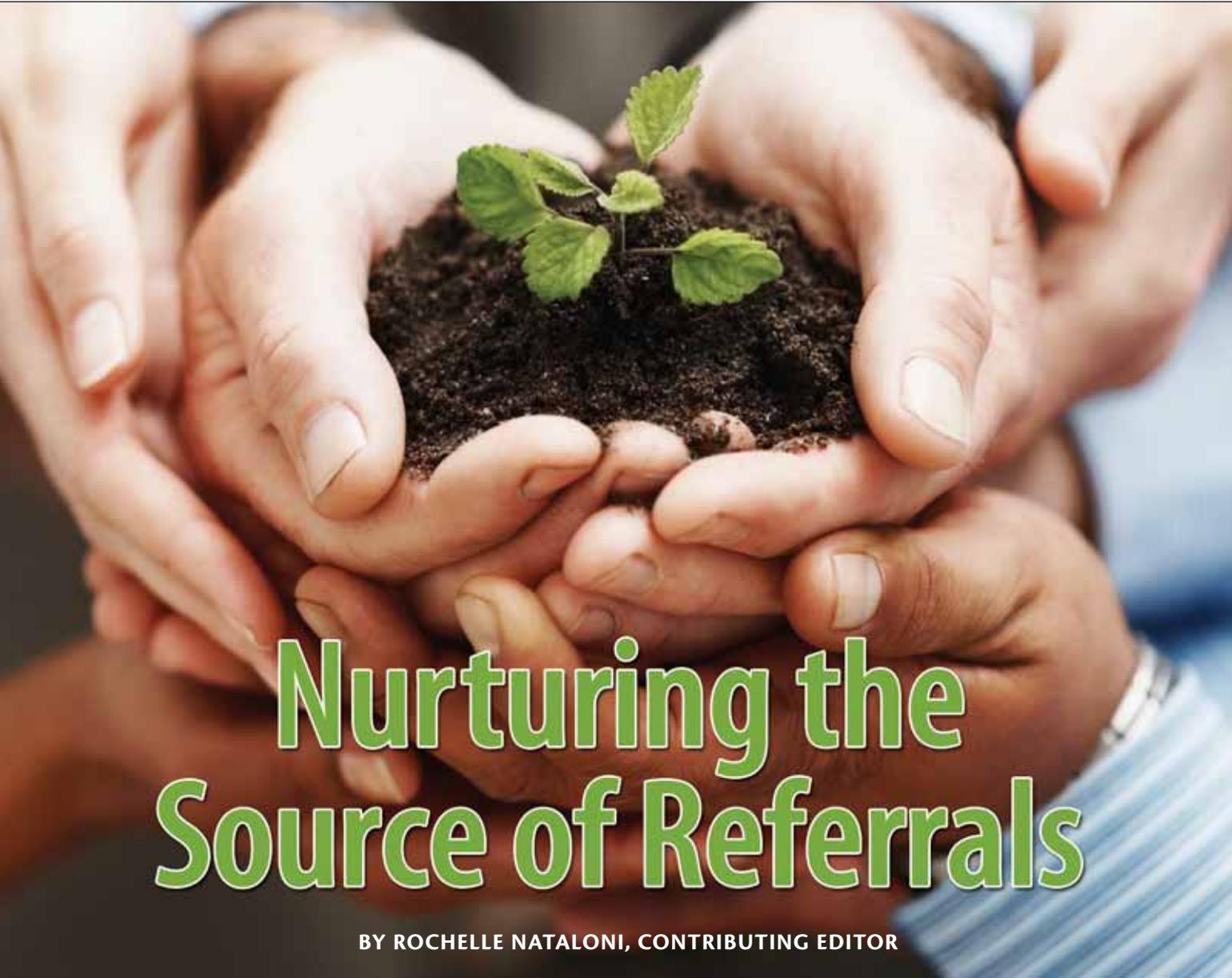


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TODAY



Nurturing the Source of Referrals

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Nurturing the Source of Referrals

From the classic to the cutting edge, provider referrals are the conduit to the consistent growth of the practice.

BY ROCHELLE NATALONI, CONTRIBUTING EDITOR

Most surgeons are loath to ask for referrals, especially when they believe that satisfied patients will flock to their primary care doctor and rave about the surgeon. That might happen, but it is not enough to build a referral network.

Those of you familiar with Stephen Covey's Seven Habits of Highly Effective People will recall the first: seek first to understand, then to be understood. To this I apply the golden rule of relationship building and networking (meaning the good old-fashioned kind, not the "social" version à la Facebook): give before you get. As you engage in a new relationship, ask "how can I help this person," before contemplating how he or she can help you.

What this month's practice specialists will tell you is that they have to work hard for referrals and use multiple means to stimulate action on the part of all referral sources. Given the high cost of patient acquisition through paid advertising, it makes perfect sense to use social media and other low-cost technological tools as part of an overall strategy to develop relationships with other medical providers. Thinking about how you can add value to their practice or professional development is a good first step to making these recommendations significantly more valuable to yours.

—Section Editor Shareef Mahdavi

Given its rich developmental history—from the earliest incisional techniques to today's presbyopia-correcting multifocal and accommodating IOLs—it would seem that change is the only constant in refractive surgery. One thing that does remain the same, however, is the importance of generating and nurturing strong referring relationships with other health care providers to ensure that a steady stream of patients is drawn to the practice.

As Minnesota Eye Consultants' David R. Hardten, MD, explains it, "In our high-volume premium practice, the influx of new patients from referral sources is critical, so constantly maintaining the relationship is crucial." Dr. Hardten says his bustling Twin Cities practice does this by "understanding the goals of the [referring] practices so that our practice can best meet their needs, by

educating the [referring] practices about the various specialties within our practice, and by serving the needs of their patients in an effective and premium manner."

CLASSIC STRATEGY: COMMUNICATION IS KEY

The fact that Minnesota Eye Consultants' initiatives compose a classic strategy based on communication and mutually beneficial goals is not lost on John Pinto, president of J. Pinto & Associates in San Diego, California. Mr. Pinto observes, "Generating patient referrals from physicians and optometrists has changed little in the 32 years that I have been a management consultant." This ophthalmology management pundit has long relied on a handful of winning tips when advising clients about generating referring relationships.

"Start small, but start today," stresses Mr. Pinto. "Most eye surgeons are inordinately sensitive to rejection; they loathe the idea of calling—hat in hand—on a potential referral source." Mr. Pinto's advice? Get over it. Once you do, he suggests, be persistent. "Even if you sense some resistance at your first visit, keep calling. It is important to recognize that every potential referral source is different, so you may relate to some on a purely dry, professional basis, while other referral sources may, in time, become dear friends," he says.

Ophthalmologists and ophthalmic administrators interviewed for this article say generating and nurturing the sources of referrals are just as much about attending medical symposia and local Chamber of Commerce luncheons, for example, as they are about scheduling a game of golf with the potential source. Mr. Pinto puts it this way, "Play to your strengths. If you are not socially graceful but love science and medicine, pull together a small study group of compatible peers rather than participate in a sports bar outing." You can benefit from the strengths of your staffers as well. Mr. Pinto stresses the importance of getting the entire practice involved. "Harness the strength of the practice. Have a multilateral relationship with each important referring office. Your office manager should

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know his or her office manager, your head technician should know his or her lead nurse, and so on," says Mr. Pinto, who also stresses the importance of continuity. "Make your rounds with sufficient frequency," he advises. "Your top referral sources should be 'touched' at least every quarter, but twice a quarter is even better."

WHAT WORKS

Ophthalmic surgeons who remain buoyant in the choppy waters of a tough economy, like Peter J. Polack, MD, of Ocala Eye in Florida, are eager to share what works with respect to engendering effective referral relationships. Dr. Polack, who founded the online practice management service Emedikon (<http://www.emedikon.com/>), says not to underestimate the need for the practice to have a high local recognition factor.

"It is important for the practice to have a presence in the community with the physician giving lectures and participating in charity events and sponsoring school sports teams and things of that nature," he says. "But 'elbow rubbing' is often best left to the practice's marketing director. We physicians don't want to give the appearance that we are trying to 'drum up' business," he says.

Joanna Chmiel is the administrator of Chicago's Kraff Eye Institute—a veritable institution in this field—which was founded by Manus Kraff, MD. She says their philosophy is to embrace all avenues to stimulate patient referrals with an eye toward establishing an almost familial feeling with referral sources. One of the initiatives in place for enlisting

sources of referral includes visiting new optometric offices to introduce their surgeons and practice, as well as to provide information about comanaging opportunities.

"We also provide educational sessions for all local optometrists and ophthalmologists," says Ms. Chmiel, "related not only to mutually beneficial services such as comanagement of surgical procedures but also value-added seminars that focus on information about optometry-specific billing and marketing to benefit their own practices." She notes, "While there is some elbow rubbing at cocktail parties and at medical meetings and playing golf together,

REV UP YOUR REFERRAL RELATIONSHIPS

Follow these tips to take your referral relationships from so-so to symbiotic.

1. Start small but start today. If you are sensitive to rejection and would rather not request referrals, get over it!
2. Play to your strengths. If you are more comfortable networking professionally than socially, acknowledge that and apply it to your referral-generation strategy.
3. Get over yourself. Generating referral relationships is about more than the practitioner, so get your entire practice involved.
4. Have a strong community presence. Do not underestimate the need for the practice to have a high local recognition factor.
5. Face-to-face visits are invaluable. Visit new optometric offices in your area to introduce yourself and provide information about comanagement opportunities.
6. Provide educational opportunities. Value-added services that help potential referral sources see immediate benefits go a long way toward building mutually beneficial relationships.
7. Touch base consistently. Once a referral relationship is established, interact with the source at least once—or better yet twice—per quarter.
8. Keep the lines of communication open. Referral sources should be kept informed regarding treatment of their patients; they should never feel like they are at risk of losing patients to you.
9. Get connected. Posting patients' testimonials and technology-update videos on YouTube and practice updates on Facebook can help introduce you to a vast array of potential referral sources.
10. Track referrals. Compare year-over-year referrals and look for growth. This can help you identify which markets (ie, general practitioners, general ophthalmologists, optometrists, etc), are producing the most fruit.



A Yelp online review for the Kraff Eye Institute (ht.ly/3iXMu).

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it is much more about making our referring doctors feel like they are an important part of our practice.”

Ms. Chmiel describes the Kraff Eye Institute’s process of effective and consistent interaction with referral sources as one that ultimately helps build both practices. “We refer patients back to the referring optometrists for reading glasses or sunglasses,” she says. “If it’s more geographically convenient for comanaged surgical patients, we will recommend that they see the referring optometrists for follow-ups.” Ms. Chmiel points out that the practice also does its best to minimize the effort required from providers when they refer patients. “We adapt to the preference of the providers with respect to their preferred type of contact, how often they want to hear from us, and what types of informational material they like to give their patients,” she explains.

The Kraff Eye Institute helps keep referring optometrists and their staff informed of new technologies, policies, and marketing techniques and also provides staff to referring optometric offices to assist in patient screenings and consultations. These efforts help referring practitioners feel valued, and they encourage loyalty. Ms. Chmiel points out

that other factors usually contribute to the decision on to which physician they send their referrals. “Ultimately, Dr. Kraff’s experience, reputation, and proven outcomes weigh the heaviest in referral decisions,” she explains.

NETWORKING HELPS

Once sufficient familiarity has evolved with referral sources, John Pinto suggests asking them for referrals to fellow providers to whom they are “close” in addition to referrals of patients. This, he points out, unleashes the full power of networking. Finally, says Mr. Pinto, it is important to remember the 80/20 rule. “Twenty percent of your potential referral sources will generate 80% of your professional referrals.” It is important to tend to each one equally, because you never know which ones will sprout. For instance, while general ophthalmologists and optometrists represent the lion’s share of potential refractive IOL patients, other health care providers are fair game and can be a rich referral source. Essentially, networking with general practitioners and endocrinologists has led to an abundance of geriatric patients for Dr. Polack. “Many of the patients who are referred to us who are geriatric end up referring their family

CAN “E-FERRALS” BE FAR BEHIND?

Although good old-fashioned face-to-face schmoozing is good for seeding the referral field, there is no denying that online social networking sites and sophisticated electronic health records’ capabilities are vital ways to easily expose information about a practice’s capabilities to throngs of potential referral sources as well as potential patients.

Gordon & Weiss Vision Institute in San Diego is on board with the possibilities that social media can introduce to the referral relationship dynamic. For instance, Gordon & Weiss practice administrator Cindy Haskell says a very successful way of attracting new patients to the practice has been via testimonials from satisfied patients posted on Facebook and YouTube.

“Patients who are enthusiastic about their [visual acuity] results are asked if they would like to make a short video to share their excitement about their new vision,” explains Ms. Haskell. “We use a Flip HD video camera and record them right in the exam lane. After they sign a release, we post the videos on our Facebook page and on the practice’s Web site.” Her practice also encourages patients to post comments on Yelp and other sites that review medical services. “This helps to keep our message and patient testimonials top of mind with individuals interested in vision correction procedures,” she explains.

In Chicago, Kraff Eye Institute’s practice administrator Joanna Chmiel, too, notes that her practice has established a social networking presence. “While we tend not to overestimate the business-generating power of social media outlets, we do recognize the overwhelming growth in the world of social networking,” she says. This type of marketing lends itself more to capturing the attention of potential patients than to generating or maintaining provider referrals. Ms. Chmiel points out that Facebook in particular can additionally be used to cultivate provider referral relationships “by promoting affiliate optometrists on our page and by incorporating our referring optometrists into contests or other on-line features that can help provide practice exposure for them.”

Kraff Eye Institute recently embarked on a full-fledged electronic health records effort (Medflow Ophthalmic Suite; Medflow, Charlotte NC) that Ms. Chmiel suspects will offer “further improvements to how our practice handles referrals and communication regarding mutual patients.”

The practice is also preparing for the launch of a referral portal in conjunction with Sophrona Solutions, Inc. (North Oaks, MN) (www.sophrona.com/ophthalmology_patient_portal.htm) to enable the seamless exchange of information on mutual patients’ care.

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A Yelp online review for the Gordon & Weiss Vision Institute (www.yelp.com/biz/gordon-and-weiss-vision-institute-san-diego).

members who are refractive candidates," he explains.

Cindy Haskell manages the day-to-day operations of Gordon & Weiss Vision Institute in San Diego, headed up by veteran refractive surgeons Michael Gordon and Jack Weiss. She says the practice has developed numerous strategies to stimulate patient referrals. Top among these initiatives are continuing education programs, grand rounds, and patient seminars. "We like to educate primary care doctors about the advantages of the deluxe lenses that can best suit the needs of their patients," Ms. Haskell explains. "Offering continuing education courses helps us reinforce the relationships we have with the optometric community and demonstrates our commitment to offering the most advanced solutions for our patients."

Although communication between surgeons and referring providers is supposed to be a given, it sometimes falls through the cracks. In these unfortunate situations, the referral source tends to get shortchanged. Ms. Haskell says Gordon & Weiss makes sure this never happens. "We always contact the patient's primary care physician for the history and physical prior to proceeding with surgery," she says. "Our surgeons write letters to the physician to inform [him or her] of the lens chosen by the patient and to thank [him or her] for participating in the care of the patient. We believe this



Gordon & Weiss on YouTube (www.youtube.com/user/BWVisionInstitute#p/a/B0164C3E70CB3C2E/1/3r-795wOhPU).

communication helps to keep the doctors informed about the latest treatments and lenses available and lets them know we are offering the most advanced eye care to the patient."

This basic but important step in the referral relationship process paves the way for a mutually advantageous affiliation going forward. Surely, a bountiful future is ultimately what it is all about; looking back is important as well. "We always compare year-to-year referrals and look for growth, just as we do with marketing and word-of-mouth leads," says Ms. Haskell. "We have found that our efforts to develop and retain referral relationships have helped to buffer the economic recession." ■

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