The Internet’s Role in the Premium Practice

The Web site should reflect your practice’s position as a premium provider.

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Premium Practice Today is a monthly feature section in CRSToday providing articles and resources to assist surgeons and their staff in the pursuit of premium practice development to facilitate exceptional experiences for patients and business success.
Every day in the United States, 175 million people use the Internet. According to Pew Research, 84% of them are searching for information about health care services, more than half are doing so on behalf of another party, and 44% have reviewed someone’s commentary on the topic.1 A superior practice that is well known in the community relies on word of mouth for 80% to 90% of its business. According to David Evans, PhD, MBA, however, a premium practice should be properly positioned online to capture patients who are looking for the services it provides.

“If a prospective patient hears about a doctor from a friend, the first thing he or she is going to do is look that doctor up on the Internet,” he said. “If that person cannot find the doctor online, that is a big problem.”

Dr. Evans is the CEO of Ceatus Media Group LLC (San Diego, CA), which specializes in designing customized medical Web sites and providing search engine optimization services. He has a doctorate in ocular physiology and has been involved in Internet marketing for ophthalmology since 1996.

“Although a practice’s ranking on Google is totally unrelated to the quality of service the doctor provides, consumers perceive a connection between being easily found on the Internet and credibility,” he explained. “A premium practice must have premium online visibility.”

THE LOOK, FEEL, AND CONTENT OF THE WEB SITE

The Web site of a premium practice should contain content that is highly educational as well as a prominent call to action. “The practice must make it easy for prospective patients to call,” Dr. Evans noted. “For example, a common mistake is putting the practice’s contact information and phone number in only one place (eg, on the contact page), when it should be in several.”

The Web site’s marketing message should be clean and clear, Dr. Evans said. “What is vision correction really about?” he explained. “Independence from glasses and contact lenses means an enhanced lifestyle. Enhanced vision is about being able to ski without glasses and play tennis at night.” He said that, often, practices decide to feature the doctor or its technology on the Web site, but this information does not resonate deeply with patients: “They want to know how does this service affect me? It is important that the doctor is Harvard educated, but that should not be the focus.”

Web sites should be easy to navigate. Online scheduling and the option of filling out paperwork before an office visit might help enhance patient flow in the practice, but neither is a priority for potential patients. “Most often, patients would prefer to call the practice and have their questions answered quickly by a highly knowledgeable person,” Dr. Evans said. “It is more intimate, and it is more effective, particularly for an initial LASIK consultation, for example.” (For more on the importance of the telephone in the premium practice, see the March 2010 issue of PPT.)

What other factors should a premium practice consider when designing its Web site? According to Dr. Evans, the trend is toward compatibility with today’s large, wide-screen monitors. Based on the aforementioned statistics from Pew Research, consumers also value testimonials. “Unfortunately, Web site designers tend to bury patient testimonials, this is a big mistake,” Dr. Evans said. Web sites should be structured for prospective patients as well as individuals who may be doing research on their behalf.
SEARCH ENGINE OPTIMIZATION

Search engine optimization is a specialized niche. Dr. Evans explained, “Theoretically, it is a simple thing: the Web site must be made compatible with a search engine’s algorithm so that the practice’s Web site appears highly ranked in the search results.”

Google accounts for about 70% of the world search market, he said. Search engines use unique and highly confidential algorithms to rank Web sites. “Crawlers” or “spiders” review Web sites, score them based on a number of variables, and then store the Web sites in a database. When a user searches for a keyword (eg, LASIK), the search engine database runs the keyword search through its algorithm, evaluates all of the variables assigned to each Web site, and creates a list of Web sites in the search results based on the algorithm.

A select number of results from this type of search are referred to as organic. Six out of seven Internet users click

Tracking Online Activity

Because of the digital nature of online marketing, results can be directly quantified. Online marketing lets the practice track Web site visitors and e-mail and phone leads generated by the site. Although tracking online marketing is important, it is not everything.

One of the major benefits of your online marketing and Web site’s visibility is branding your practice and your marketing message. In addition to tracking activity on your Web site, it is also important to judge your online activities based on the visibility and branding value. Internet marketing studies show that the better a practice is at branding itself, the more successful it is at converting consumers to patients.

Note that health care Internet marketing can be very hard to track, as are Internet patients. Many patients receive a word-of-mouth referral and then go online to evaluate your practice further. In this scenario, however, the patient may say he or she heard about the doctor from a friend. What happens, however, if a patient receives a word-of-mouth referral and cannot easily find you online? Has this ever happened to you?

Keep in Mind

• Patients may require 6 to 9 months to make a surgical decision and receive many referrals to your practice.
• Measuring the last place the patient visited when he or she made contact may not provide a true picture of the benefit of each marketing effort.

Some Specific Difficulties With Online Tracking

• The Internet ties all of the marketing programs together and should be evaluated in that light.

• It is difficult for patients to remember exactly how they learned about the practice.
• Internal research by Ceatus LLC, for example, shows that only 7% of prospective patients correctly identified the directory online at the All About Vision Web site (www.allaboutvision.com/lasik-surgeons) as the source of the referral, even though the call came from a tracking number found only on that Web site.

Tracking Solutions

• Keep the questions you ask simple. Ask, “Have you seen our Web site?” not, “how did you hear about us?”
• Use tracking phone numbers that are specific to each strategy.
• Proxy Web sites provide a copy of the Web site that allows you to track e-mails and phone calls derived from specific marketing programs.
on organic listings, which consumers perceive as highly credible, Dr. Evans said. These searches drive substantial traffic to Web sites and have long-term visibility.

**OPTIMIZATION BY SEARCH TERMS**

In order to implement an effective optimization strategy, the practice must establish the key word focus of the Web site search strategy. First, the practice should be optimized by its name so that it will appear when someone searches for the doctor’s or the practice’s name. This type of optimization provides important support for word-of-mouth referrals. Second, for consumers who are not familiar with the practice but are in the same geographical area, the site should appear in the search results for generic terms (e.g., LASIK, new-technology IOLs) that include location. A search engine optimization strategy that Dr. Evans recommends is focusing on more specific localized search terms like *procedure* and *market*.

“When a consumer searches a generic term, such as LASIK surgery, numerous large sites will appear in the results, like ASCRS, Wikipedia, FDA, etc,” Dr. Evans said. “It is hard for a practice to compete with the credibility of these large sites. Google’s algorithm might rank one or two local doctors on the first page for a generic search term, however it is extremely difficult to obtain this result. It is not a good idea to pursue this type of ranking as a primary strategy.”

Practices have the option of buying into one of the large eye care information portals, such as www.allaboutvision.com or www.lasiksurgerynews.com. According to Dr. Evans, large portals rank for generic search terms, which is how 80% of people search. “It is a common misperception that a potential patient would search ‘LASIK and Philadelphia,’ for example, as an initial search,” he explained. “That is not how it works. We know that patients take 6 to 9 months to make a decision about refractive surgery, so they want to learn about the procedure first. The first searches and majority of the searches are for the generic search terms, which allow patients to learn about the procedure.”

Because it is so difficult for a practice’s site to rank when a generic search term is used, Dr. Evans recommends to his clients that they use directories for that type of visibility. “The practice’s Web site should focus its visibility strategy for the local search term,” he said.

Search engine optimization is complicated, and some companies that provide the service might not be experts. “It is possible for a Web site to be damaged if the process is done incorrectly,” Dr. Evans noted. “Google can penalize a
Web site if it believes that there is undue manipulation taking place with search engine optimization, such as duplicate content about the practice on multiple Web sites.

**PAY-PER-CLICK ADVERTISING**

Pay-per-click ads appear when a generic search term is used. “That is the other side of search engine optimization,” Dr. Evans said. “If the practice can’t appear on Google for an organic search, then purchasing pay-per-click advertisements can provide additional visibility.” A pay-per-click ad strategy (if it is in the budget) should be an adjunct and not the primary focus of the practice’s online strategy, he advised.

Pay-per-click advertising is easy to implement, can drive substantial traffic, and is excellent for brand building, Dr. Evans said. Still, there are several cons associated with pay-per-click advertising. Click fraud is common, and the practice has to pay for clicks that are not legitimate, which can become expensive. Moreover, there is no long-term visibility: once advertising ceases, the Web site no longer appears in the search results. “The biggest con, however, is that only one in seven users clicks on pay-per-click ads,” Dr. Evans said. “These ads have limited credibility in the eyes of consumers.”

**BLOGGING AND SOCIAL MEDIA**

Blogging by physicians is an important and powerful tool. Dr. Evans commented, “Although there is a lot of buzz about other social media, in our experience, it is not that useful for driving quality traffic to physicians’ Web sites. With Facebook, for example, statistics show visitors are on a given site for 20 seconds and Twitter really has had no impact.” Practices should not ignore social media, but they should keep its value in perspective.

“Blogging, however, and answering patients’ questions online empowers them and also builds trust with the practice,” noted Dr. Evans. If the practice is going to offer an online forum to respond to patients’ inquiries, however, that site needs to be operational around the clock and on weekends. “People expect to receive prompt responses, so the parameters of the online exchange have to be very clear,” Dr. Evans said. “Designated members of a practice’s staff may participate in such an online forum, as long as they are educated and can provide accurate and clear information.”

**REPUTATION MANAGEMENT**

What is the appropriate response to negative comments about the doctor or the practice that appear online? Some well-known sites are www.lasikfraud.com, www.doctorscorecard.com, and www.ripoffreport.com.

“There is a lot of confusion over this,” Dr. Evans said. “Reputation management is the opposite of search engine optimization, in a way. Instead of trying to get a practice ranked higher on the search results, the goal is to get the negative comments to appear farther down on the search results—preferably off the first page of Google.”

This is a tough proposition, he said, as it entails having to move seven or eight sites ahead of the negative comments in the search results. “We suggest the practice create new sites using domain names that include the doctor’s name,” said Dr. Evans. “These Web sites can potentially become ranked higher than the one with the negative comment. It’s a difficult thing to accomplish, yet many providers are interested in this. It is distressing to have negative comments, but it is going to happen.”

Certainly, if the negative comments are clearly false, a practice has legal options. In general, however, comments are protected by freedom of speech. “We recommend that practices do not engage or recognize such comments, as that can exacerbate the situation,” Dr. Evans said.

To manage the reputation of the practice online, he suggested setting up a monitoring system by registering for Google Alerts, which informs a practice when its name is mentioned in the Google index. Other strategies include publishing news releases with positive comments, using social media and blogs to optimize the doctor’s and the practice’s names, and encouraging patients to write positive reviews about the practice on sites such as Google Local, Yelp, Vitals, and Healthgrades.

The Internet is an important component of marketing for premium practices, Dr. Evans said. The goal should be an excellent Web site for the practice that is easy for consumers to find. ■

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