

WHEN REFRACTIVE OPTIONS INCREASE, PRACTICES GROW



By meeting key needs in refractive surgery, Visian ICL benefits patients and supports practice growth for both surgeons and referring doctors.

BY PAUL J. DOUGHERTY, MD; RENATA STONE, MBA; RON ZEPEDA

Twenty years ago, I realized that lens implants would be the future of refractive surgery. Intraocular lenses for cataract surgery were becoming more advanced, and it was clear we could have lens options for younger patients without the downsides and candidacy limitations of LASIK. I began using an implantable Collamer lens (ICL) in Mexico in 1999 and served as principal investigator in the FDA study of the Visian ICL (STAAR Surgical) for myopia and hyperopia.

To date, I've performed over 2,000 Visian ICL procedures, and I have led multiple medical tourism trips to Central America since before it was approved in the United States. When the Visian Toric ICL (STAAR Surgical) became commercially available, I already had patients lined up and waiting. They didn't want to have a two-step LASIK or PRK procedure, nor did they want to travel abroad, so I had them hold on for approval of the Visian Toric ICL. That very week, I performed the first Visian Toric ICL procedure on the West Coast.

The Visian and Visian Toric ICLs not only fill a gap in options for refractive surgery, but they also offer an enhanced option for certain patients who are candidates for multiple procedures. In a large, rapidly expanding practice, these implants help us grow and serve both our patients and our referring doctors.

WHEN VISIAN ICL IS BEST

For my patients, I exclusively perform vision correction procedures, including LASIK, PRK, Visian ICL, and Toric ICL, refractive lens exchange (RLE), cataract surgery, and Intacs Corneal Implants (Addition Technology).

LASIK is the most common choice, but Visian ICL and Toric ICL allow me to provide poor or borderline LASIK candidates another way to correct their vision. I strongly encourage patients with -8 D and above who are under age 46 to reconsider LASIK and PRK and instead have Visian ICL or Toric ICL. For patients with thin or irregular

corneas, dry eye, or large pupils, I preferentially offer Visian ICL over LASIK or PRK at -3 D. In cases where it comes down to a decision between Visian ICL and PRK, I choose the ICL because it gives the patient excellent quality vision,¹ quick visual recovery, and no postoperative dry eye.² For patients age 46 and older who are -8 D or more or have any of these issues making them less ideal candidates for laser vision correction, RLE is usually my recommendation.

Integrating Visian Toric ICL into my practice has been seamless. It only requires marking the cornea and doing a little more surgical planning than the spherical version requires—certainly much easier than having two surgical procedures. Pricing is tiered based on refractive error. The higher tiers are refractive errors greater than -10 D and toric cases.

GROWTH STARTS WITH THE LEADERSHIP TEAM

At Dougherty Laser Vision, we have five surgeons and five optometrists (two full-time, three part-time) serving at eight locations. We work with about 350 comanaging optometrists and a number of ophthalmologists as well. Our two full-time outside sales representatives work entirely in the field, meeting doctors in their practices and talking over shared meals. They help us understand new challenges and goals as they arise so we provide a higher level of support that instantly responds to, and even anticipates, our partners' needs.

Our business leadership team ensures that this all runs smoothly and the business continues to grow. In fact, our CEO and Sales Director are two big reasons that Dougherty Laser Vision has experienced 25% top-line growth each year for the last 5 years.

Our CEO, Renata Stone, MBA, has dramatically expanded our business by recruiting a top surgeon, building our franchise company, and elevating the company's morale to the extent that we were named a top employer by a local newspaper. Renata explains how our practice's goals and philosophy translate into highly effective real-world marketing and growth:

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“Our business plan is built around three pillars—our patients, our employees, and our referring doctor network—and we have a business plan and strategy for each of those audiences. A set of values guides those efforts, most notably our desire to put others before ourselves and place results before profits. That means, among other things, offering patients all the latest refractive options, showing compassion and caring, and anticipating our referring doctors’ needs. It’s a never-ending process of improvement through small changes every day, in both our business and in treating patients.

“With that philosophical framework in place, we can focus on growing the business. We currently rely on referrals from doctors and friends for about 80% of our patient volume, with the other 20% coming from digital marketing. Digitally, we focus primarily on search engine-driven advertising, which targets people searching for refractive surgery. We do no other advertising. Because we can track web leads and analytics like cost per lead and ROI, we know that our referrals from this route have doubled from what they were just 2 to 3 years ago.

“The methods for acquiring new patients dovetail right into our patient education plan, which begins before most of them walk through the door. We know patients’ refraction when doctors refer them, and we ask patients who schedule appointments through our website for their prescription. That allows us to send targeted information and videos about the refractive options that may be available for each person—an especially beneficial approach with Visian ICL because most patients have never heard of ICLs. It gives patients time to learn about new technologies, improves our conversion rate, cuts chair time, and helps us deliver exceptional patient care.”

SUPPORT FOR REFERRING DOCTORS

Just as our options for refractive surgery have grown with new advances like the Visian Toric ICL, so have our doctor referrals: 20% year over year for the past 5 years. This is due in large part to our Sales Director, Ron Zepeda, whom we recruited for his decade-plus of industry experience and gave the latitude to do what is right to grow the business. We can offer our partners in optometry some rewards, such as the STAAR Surgical OD Ambassador program, which allows surgeons to perform referring medically qualifying optometrists’ Visian ICL procedures for free when permitted and appropriate. But the most important thing is to understand optometric practices and ensure that the benefits of referral go both ways.

Ron explains how our knowledge of the inner workings of optometric practices helps us build those relationships:

“Our optometric network looks to the members of our sales team as consultants. We know that in a high-pressure environment of online frame and contact lens sales, they need viable solutions to mitigate the financial stress. When they partner with us, we can help them diversify their revenue streams. We offer a wide range of refractive options to our patients, and offering more options through referral is key to keeping their practices successful now and in the future.

“Our goal is to align our product with their practices. We should help them grow, just as they help us. That alignment helps us build a welcoming bridge between our practices—smooth for patients, doctors, and staff. These are their patients, not ours, so we communicate at every touch point through our doctor portal, as well as through our patient counseling team, which reports to the OD liaisons so they can give referring optometrists immediate feedback on the refractive consultation. Our surgeons also require patients to get an annual eye exam after surgery to maintain their discounts on future enhancements.”

Our referrals grow every year as a result of these efforts and our growing list of refractive options, but we never settle. Both clinically and in our business practices, we’re always changing the process, anticipating what’s next, so we can do more and serve people better. ■

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