

VASCULAR SURGERY PRACTICE CASE STUDY 0019

ADAPTIVE MARKETING FOR A WELL-ESTABLISHED PRACTICE

A nationally recognized vascular surgery practice signed on with Practice-Reps in an effort to reverse the trend of referrals being sent to other specialists for vascular interventions in the Philadelphia area.

This two-man practice had been serving the needs of patients from the tri-state area for more than 40 years. They were associated with a nearby premier teaching center and were known nationally for their pioneering research and application of endovascular procedures in the treatment of AAA and PV disease.

With two vascular fellows in training and two seasoned providers, the practice maintained an extremely busy in-office lab, as well as a vein clinic based on Vnus technology.

This practice had never marketed in the past as they relied on their long-standing reputation for surgical and interventional excellence. Both providers were active in local, regional, and national academic societies and they had enjoyed a loyal following for many years based on their academic standing.

During our internal marketing audit, we discovered that consults and referrals for surgery and intervention had indeed been falling off for some time in this dense, competitive market. The vein lab and vascular lab were both heavily dependent on internal referrals and they too were experiencing some perceived fall-off in volume. We say “perceived” because it became apparent that the practice had never tracked referrals in the past and all of their perceptions of practice volume were anecdotal.

As we began the field implementation portion of our engagement, we discovered that the providers did indeed enjoy a highly regarded reputation for excellence, but many referral sites were receiving pressure to refer to other hospitals and providers in the catchment area. It appeared that the marketing efforts of surrounding institutions were having a negative effect on referrals to our client despite their stellar reputation.

As we surveyed the referral community, we began to hear of some potential changes in personnel at competing institutions. These rumors of change began to make local physicians more open to change and we did our best to confirm the “talk on the street.” Within weeks, we discovered that the rumors were true and there had been a major shift in providers from one institution to another. We saw this period of change as a real opportunity for us to gain market share and we changed our entire field strategy to capitalize on the timing of this change. Rather than pursuing current and past referral sources from this practice, we began a focused effort on any and all referral sites that had been sending to the competing institution.

In this case, our marketing efforts were simple. Rather than spend time and money on ads, brochures, and marketing materials, we went straight to the competitive referral sources with our current materials while we discussed the clinical capabilities and reputation of our providers on a personal level with physicians in the competitive catchment area. Many proved to be open to our discussions during this time and most were glad to hear of the practice’s ease of access for DVTs and insurance acceptance policies.

This “period of change” in the surgical community proved to be a unique opportunity for our client and we capitalized on it for a ten month period. Rather than focus on the other providers who had been increasing their interventional efforts, we chose to go after the opportunity at hand by pursuing the change in surgical care in the community.

At the end of twelve months, we tallied the results and found that we experienced a **30.4% increase in new consults and a 52% increase in diagnostic referrals** over the previous year. The venous lab showed similar results, although patients were not tightly tracked for this ancillary service. Our efforts helped to stem the tide of decreased consults while growing referrals for a vascular lab that had been nationally recognized for its volume by Navix Labs.

Now in our second year of marketing for this practice, we have begun to shift our focus as we pursue the interventional market. In year two of our efforts, we have reduced our call fee to afford website and marketing material development so that the client’s annual marketing budget remains the same while we pursue the secondary market challenge from interventional specialists in the marketplace.