



ADVISOR INSIGHT

INSIGHT AND KNOW-HOW FROM THE FIELD

THIS Month's Topic

A New Model for Physician Marketing

by Dan Dunlop



For a couple of years now I've been on a rant about the current state of referring physician marketing. It all started when I was asked to write an article about the role of new media in physician relations. While conducting research for the article, I visited a number of healthcare marketing and physician relations LinkedIn groups and used them as crowdsourcing platforms to find out what types of innovative practices are being used to engage referring physicians. The idea of crowdsourcing novel solutions was an exciting and promising proposition.

In the past, I had found LinkedIn groups useful for soliciting ideas and suggestions from colleagues in the field. However, on this occasion, the few responses I received via the LinkedIn discussions were far from earth-shattering: use CMEs, host events where physicians can bring their families, hold lunch and

learns, etc. The members of these groups didn't offer up any solutions that recognized changes in how physicians consume information and interact with one another. They also didn't reflect changes in primary care physicians' outlook on the field of medicine, and the pressures they face due to the evolving healthcare environment (EMRs, patient registries, the patient-centered medical home, and accountable care, to name a few). I believe my experience with the LinkedIn groups is validation that most healthcare organizations aren't creatively or strategically tackling physician marketing. Given that physician referrals still represent a large percentage of the patient volume for most hospitals,

this should be troubling, but for some reason, it seems to be the status quo.

Marketing, if done properly, should fit within the flow of the target audience's life. It is at its best when it's not an interruption, but seamlessly integrated into the individual's work-

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flow. For many physicians who have now embraced new media, digital communication makes sense. It seems that with the rise of the "social physician," a successful physician

relations program should integrate a number of disciplines, including physician relations, marketing, and digital services—a perspective that most organizations have not yet recognized or embraced.

For those who believe that the

EDITOR'S NOTE: We are replacing HMA's monthly "Ask the Advisor" question with a truer description of what HMA's editorial board offers: "Advisor Insight." Answering specific questions about marketing issues and trends was very helpful to many readers, but we hope you'll gain even more insight from our advisors with their increased scope of analysis on healthcare marketing trends. We hope you continue to enjoy reading HMA.

—Jacqueline Fellows, Editor



time has not yet come to integrate social media into the physician marketing mix, I suggest you check out the vast array of thriving physician-only online communities, including Sermo, Doximity, and Medscape, to name a few. Sermo now has more than 125,000 physician members representing 68 specialties. Doximity has now surpassed 100,000 physician members. That's over 15% of U.S. physicians. If more evidence is required, look at organizations like MD Anderson Cancer Center. Its @PhysRelations Twitter feed, a communication channel completely dedicated to referring physicians, has more than 3,700 followers. MD Anderson also uses Paper.Li to distribute a daily Twitter eNewsletter comprised of tweets from its physicians, researchers, and leaders. Clearly some physicians have made the leap to social media.

Integrating social media and other contemporary tools, such

as online video, into the physician marketing mix does not mean abandoning old tried and true communication tactics. For the time being, traditional tools, like the physician newsletter, are still relevant. What has changed is the number of opportunities that exist to leverage that same content across a number of communication platforms. A great example of this is the physician marketing program in place at Cooper University Hospital in Camden, N.J. Cooper's program is multifaceted and makes the most of every piece of content. It includes social elements like a dedicated Twitter feed for physicians, LinkedIn, and the Inside Cooper blog. But the real secret to the success of the program is the way the organization repurposes content across a variety of communication platforms.

The centerpiece of Cooper's program is a physician newsletter, *The South Jersey Medical Report*,

overseen by a physician advisory panel. Each issue of the publication includes feature articles on two of Cooper's institutes (heart, bone & joint, cancer, digestive health, neurosciences, etc.) along with updates on new medical staff, CMEs, clinical trials, technology acquisitions, and contact information for physician relations. At the most basic level, the publication is mailed to a list of referring and employed physicians in the region. However, that's just the beginning. Feature stories for the newsletter usually begin with a video interview of a physician from that specific institute. Much of the content for the initial feature article is pulled from the video transcript. That editorial content is then repurposed on the department's section of Cooper's website, the Inside Cooper blog, and the *South Jersey Medical Report* microsite, which is designed specifically for referring physicians. In this manner, one piece of content is leveraged across multiple communication channels, making the effort efficient and cost-effective.

Has this integrated approach to physician marketing been successful for Cooper? It has certainly given the organization's physician liaisons the tools they need to effectively communicate the Cooper story of clinical excellence. But the proof is in the ensuing referrals. In the first year of Cooper University Hospital's physician marketing program, the *South Jersey Medical Report* campaign led to double-digit growth in referrals for its cancer, heart, and neuroscience service lines. Based on the data, Cooper University Hospital is having success at changing referral patterns in South Jersey. *huma*

New Physician Referral Models for Value-Based Care

APRIL 25, 2013 WEBCAST

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- Employ sales techniques to increase referrals
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