

Digital Physician Relations:

A NEW MODEL FOR MARKETING TO REFERRING PHYSICIANS



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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 crowd sourcing platforms to find out what types of innovative practices are being used to engage referring physicians. The idea of crowd sourcing 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: visit practices, hold lunch & learns, host weekend events where physicians can bring their families, etc. The mem-

bers 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). It is my belief that my experience with the LinkedIn Groups is validation that most medical practices, practice administrators and specialists aren't creatively or strategically tackling referring physician marketing. Given that physician referrals still represent a large percentage of the patient volume for most specialists, this should be troubling informa-



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tion; 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 workflow. 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 referring physician marketing program should integrate a number of disciplines including physician relations, marketing and digital services - a perspective that most have not yet recognized or embraced.

It is evident that the digital future of physician marketing is upon us. It hasn't washed over our industry like a tsunami; rather, it has been a gradual evolution that has followed the slow but steady adoption of health informa-

tion technology and digital communication tools by physicians. The emergence of the social or digital physician has been documented by numerous studies from organizations such as Manhattan Research, QuantiaMD, and ZocDoc, and written about in peer review publications including the *Journal of Medical Internet Research* (JMIR) and the *Journal of the American Medical Informatics Association* (JAMIA).

It is now clear that physicians find value in interacting with other physicians and gathering information via social platforms. Physician-only online communities like Doximity, QuantiaMD, Sermo and Medscape Physician Connect have become the leading digital gathering places for doctors seeking professional camaraderie, support and guidance. Within these online communities physicians can securely collaborate on diagnoses and patient treatment. Currently, one of these online communities, Doximity, has a membership that is so vast it includes one in three U.S. physicians.

Once it became apparent that physicians were gravitating toward digital platforms, it was only a matter of time before communicators and marketers recognized the opportunity presented by digital physician marketing.

Integrating social media and other contemporary tools such as online video into the referring 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 (Facebook, Google+, LinkedIn, Twitter and the practice website). The real secret to the success of the program is the way the organization repurposes

content across a variety of communications platforms. The goal should be to make digital content available on platforms that are easily accessible for the referring physician and his or her staff.

What kind of digital content? Any information about you, your practice and your specialty that referring physicians may find to be of value. This includes information that may seem mundane such as directions to your practice and forms that a patient can fill out prior to the first visit. But it could also include articles from medical journals and videos that introduce yourself and your team.

THE DIGITAL CONTENT MARKETER

In response to these challenges and opportunities, the functions within the physician relations department may need to evolve or change. One new role or function that seems likely to develop is that of the digital physician relations content marketer. This individual within your practice would be the person responsible for aggregating digital content and for disseminating it across numerous digital channels. Content would be aggregated on a primary platform developed specifically to meet the needs of community physicians. This could simply be a page of your practice's website that holds relevant information for referring physicians. That could be a microsite, a LinkedIn Group, a Facebook page or a blog. By continually updating the content, the information would be attractive to search engines and improve rankings. It also serves as an important resource for referring physicians and their staff, giving them the information they need to make referrals. If done properly, this initiative makes it easier for physicians to send you their patients.

The digital content marketer could also manage the practice's daily digital outreach to referring physicians and practices. This would involve using electronic marketing and social media (Twitter, Facebook, LinkedIn and others) to post links to specific pieces of content that referring physicians may value. Of course, the digital content marketer will also have to monitor social channels and respond to retweets and questions from followers. That's right, some physicians might actually talk back via social channels and engage you in conversation. Active listening would be an important part of this job, noting and then responding to requests from physicians and practice managers.

It is important to note that social media does not operate on the same schedule as your office. These are 24/7 platforms. Many physicians, because they are busy seeing patients during the day, are active on social media very early in the morning (5am – 6am) and late at night (9pm – 12am). The digital content marketing specialist can use a third party application like Hootsuite to manage the practice's social media, to schedule Tweets and Facebook posts that will be go live at designated times throughout the week. The end results will be that your practice has messaging going out via social media platforms at times that fit within the lives of the referring physicians. You will be making the information highly accessible and available on a number of different platforms.

THE DIGITAL PHYSICIAN RELATIONS SPECIALIST

If your practice has a designated physician liaison who visits referring physicians, it is likely that the liaison's role will need to evolve. Although many physicians are now comfortable with digital communication tools, many are

not. We are now only part of the way through this transformative process. This means there exists a significant opportunity to educate referring physicians, clinicians and employees of the practice about ways to access information about your practice, your expertise and services via digital channels. An important part of the liaison's role moving forward will likely involve using practice visits to familiarize these individuals with the digital platforms being used by your practice and acquainting them with the range of information available online.

Another potential future role for the physician liaison involves them becoming digital physician relations specialists. This would significantly expand the reach of the liaison by adding digital communication to their role. Today, liaisons are limited in the number of practices they can visit in a day. However, with the help of social media, they can freely disseminate information about their organizations and reach out to practices far and wide, no longer encumbered by the obstacles of geography and time.

For the digital physician specialist, in addition to the traditional functions of a liaison, a portion of each day would be spent using social media to post content linking back to the organization's digital hub (website, blog, microsite, etc.). They would retweet information shared by "faculty tweeters" and direct community physicians to the organization's online resources for referring physicians. Depending on his or her workload, the liaison could become your practice's digital content marketing specialist.

THE ROLE OF PHYSICIAN VIDEO

Today, the proverbial "doctor's lounge" is a virtual lounge found on the Internet. Physicians gather to share infor-

mation and connect with other doctors online. It is important that referring physicians can meet you (the specialist) online via your practice's social media platforms and website. Ideally, the introduction should be more meaningful than a photograph and a few bullets from your CV. You need content that will distinguish you. Many specialists are turning to online video as a way to connect and share relevant information with referring physicians.

It is clear that the use of physician video to introduce specialists to referring physicians is a trend that has merit. Given the demands on the referring physician, the ability to meet a specialist via video and hear about advances in care becomes a very attractive option. Online video is less intrusive than an office visit (by a liaison or a specialist) and places fewer demands upon the referring physician's time.

Once videos of your physicians have been produced, the digital physician relations specialist would be responsible for sharing them across the organization's digital platforms. The videos should be displayed on your Facebook page, Google+, and the practice website, at a minimum. The liaisons would draw attention to the videos through their face-to-face communications and digital communication with referring physicians and their office staff. In this way, referring physicians can meet you (the specialist) without being inconvenienced. Suddenly, he or she will have some sense of who you are as a professional and as a person, making it somewhat easier to send you a referral.

IS IT TIME FOR DIGITAL PHYSICIAN RELATIONS?

The question is no longer about the relevance of using digital tools to communicate with referring physicians. Rather, the question today is whether

your practice is going to embrace it now and get ahead of the curve, or play catch-up on the back end. Digital adoption among physicians will continue to grow. They will increasingly turn to digital communication to reach out to other physicians and to help them do their jobs more efficiently and effectively. They will actively look for trusted online resources that meet their professional needs. For medical centers and health systems looking to engage community physicians, these digital platforms are the next frontier. It is within the digital space, as a new feature of the physician relations program, that the hearts and minds of the new "digital doctors" may be won or lost. Effective communication requires that the information be delivered in a manner that fits within the context of the end-user's professional life. As physicians' appetites for digital information grows, so too must our digital marketing efforts.

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Dan is extremely active as a thought leader in the field of healthcare marketing. Dan serves on the editorial boards of Healthcare Marketing Advisor and eHealthcare Strategy & Trends. He is a contributor to a number of healthcare marketing publications and news services including Ragan's Health Care Communication News, SmartBrief for Health Care Marketers, Healthcare Strategy Alert, and Healthcare Marketing Report. He serves on the judging panels of the Web Health Awards and the National Health Information Awards. Dan is a board member of the New England Society for Healthcare Communications (NESHCo) and was appointed to SHSMD 2014 Digital Engagement Taskforce.

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