As the market for orthodontic services grows more competitive, many orthodontists have acknowledged the need for effective marketing strategies. They’ve even learned to think in terms of “branding” their practice in order to attract more new patients. They now understand that reaching higher levels of success requires building their brand in the eyes of parents of prospective patients and of adult patients. What they may fail to realize, however, is that giving patients a reason to come to the practice for ortho treatment is just part of the job.

They also face a second branding challenge – positioning themselves to attract the attention and win the support of doctors who may (or may not) refer prospective patients to them.

Creating and Implementing a Referral Marketing Program

Referrals from current patients and parents can account for a significant number of new patients every year. And, with a well-crafted online presence, you should also be able to attract quite a few additional patients. But doctor referrals probably still account for a majority of those contacting your office about ortho treatment.

Referring practices may be aware of and influenced somewhat by how you market your practice to patients and parents. In many cases, the patients are theirs as well as yours, so referring doctors want to be sure that they’re sending them to an excellent ortho practice. But other factors come into play that won’t be addressed in your “consumer” messaging. In other words, effectively marketing to potential referrers (and strengthening ongoing relationships with your top referrers) depends on establishing a second “professional-to-professional” marketing track. You can accomplish this by following these steps:

1. Hire a part-time marketing coordinator.

   Although marketing to referring practices ultimately comes down to one-to-one, doctor-doctor meetings—over lunch, at your squash club, during a CE event, etc.—getting to that point often requires a lot of planning and legwork. As the doctor and prime producer for your practice, you need to be chairside as much as possible, not handling all the details of referral marketing. Hiring a part-time marketing coordinator (MC) solves the problem. This person would take responsibility for all practice marketing activities, not only referral marketing but also internal and external strategies aimed directly at patients and parents. For a modest addition to your payroll, you can have a gregarious, detail-oriented MC working to bring new patients into your practice.

2. Study your practice’s competitive situation and develop branding that will put you in a strong competitive position.

   What are referring doctors looking for in an ortho practice? What motivates a referrer to recommend one orthodontist over another? The answers to these questions—combined with a realistic appraisal of your practice’s merits and those of your competitors—tell you what branding is possible. You may decide to position your practice as the source of the latest ortho technologies, or the customer service experts, or the leader in interdisciplinary communications, or the ortho educator, and so on. The criteria for smart positioning are that you can live up to the claim, that no competitors already “own” the position, and that the market (referring doctors) cares about what you’re offering.

3. Begin developing a diverse range of referral marketing strategies, including those aimed at...
referrers’ staff members.

As with patient referral marketing, your practice should have at least 15 ongoing doctor referral strategies at any one time. These should cover a broad range, some aimed at the doctors themselves, others aimed at their staff members (who often have a strong influence on your relationships with the doctors and where their patients get referred). Subject to your review and approval, your MC should develop diverse promotional activities, from practice brochures for referrers’ patients, to deliveries, to CE events, to doctor-doctor dinners. The chosen strategies should reinforce your branding. You should also include strategies suitable for top referrers (i.e., more expensive) as well as low-cost options for reaching a broader referral audience.

4. Categorize referring practices based on the volume of referrals received.

Some referrers deserve more attention (and marketing budget dollars) than others. For this reason, your MC should review referral records, listing all referring offices, the number of annual referrals from each, and whether they’re trending up or down. Once the list has been completed, the MC should subdivide it into A, B, C, and D referrers – A being the most productive, D being the least. This will guide the application of the various strategies and the allocation of marketing resources. This analysis should be reviewed and updated every six months.

5. Identify other practices in your area that are not referring to you and calculate how many referrals you may be able to elicit from them.

Once an ortho practice becomes well-established in its market, the doctor can easily become complacent about the referral network. If you’re getting a sufficient number of referrals, year in and year out, you turn your attention to other issues. Having thoroughly scoured your community for possible referrers, contacted them, promoted your practice to them, and built relationships, you’ve earned the right to say, “Been there, done that.” But as time passes, the picture changes. Retirements, changes of ownership, new competitive pressures and other factors demote A referrers to Bs or Cs. A new pediatrician in town—who could potentially send many new patients your way—isn’t even on your radar. An orthodontist in your area begins to market consistently, making slow but steady inroads with your referrers. Another competitor who had a loyal following among referrers neglects them to the point that they’re ready to consider other options. The point is, your MC should always be on the lookout for new referral opportunities because, unless you’re in a very small, quiet community, your market situation will change, and you’d better be ready to change with it.

6. Create a plan detailing how marketing strategies will be deployed throughout the year.

With your strategies figured out and your referrers listed and prioritized, you’re ready to come up with a comprehensive marketing plan for the year. This should be as specific as possible, including budgeting and scheduling of all 15+ strategies to be implemented. Your MC should draft and present such a plan to you, and it might make sense to review it with your treatment coordinator and other staff members who can provide valuable feedback. Note that some strategies you implement will not perform as well as you had hoped. To be prepared for possible changes, your MC should have spare strategies ready to launch on short notice.

7. Set realistic targets for how many referrals you should receive from each referring office.

Based on referrers’ history with your practice, you should be able to determine how many prospective patients each practice has been sending and then calculate an attainable increase based on your marketing plan. These targets—per referrer and total—will play an instrumental role in driving practice success. At this stage, you can also set higher targets for practices you think you can convert from minor to major referral sources.

8. Implement the plan and adhere to it diligently.

At this point, your MC shifts from planner to manager. You and other team members will also need to be ready to do your parts to make the plan work. Your personal involvement may be minimized from this point forward, for the sake of unleashing your productive potential, but you must make yourself available for playing the role of “closer” in interactions with referrers. Also, if your plan begins generating excellent results quickly, you may be tempted to cut back on the activities and spending it requires. This would be a serious mistake.

9. Monitor and analyze the results, comparing them with your targets.

Track the performance of individual strategies and of the plan as a whole, looking at hard numbers rather than trusting your (or your MC’s) impression of how it’s all working. You should have regularly scheduled meetings with your MC to review these statistics. It’s also a good idea to have the MC present a target-versus-actual report at monthly staff meetings. This will remind everyone of what you’re out to accomplish and give them a sense of ownership. If the numbers are good, morale will go
up. If the results are disappointing, the whole team can participate in figuring out why and brainstorm ideas to make improvements.

10. Adapt your overall plan and individual strategies as needed, based on performance in the market.

It’s highly unlikely that your referral marketing plan will be perfect right out of the box. Adjustments will surely be needed, and you’ll learn as you go. Strike the right balance between rigid adherence to the plan (not slacking off, cutting the budget or postponing key actions) and the flexibility needed to make changes on the fly. With up-to-date performance data and ready-to-launch replacement strategies at your disposal, you and your MC should be able to respond quickly to opportunities and counter threats, fine-tuning program performance smoothly and effectively.

To develop, implement, and reap the rewards of an effective referral marketing program, follow the 10 steps outlined here. You’ll not only increase the number of doctor referrals your practice receives, you’ll also increase your capacity to handle the additional cases that result.

About the Author

To learn more about how to market your ortho practice, attend Dr. Roger P. Levin’s “Building the Ultimate Ortho Practice” seminar. Ask your Ortho2 Regional Manager how you can receive an educational grant to attend tuition-free.