Formula for Building a Successful Practice:
From Budget-Building to Converting Marketing Dollars into Revenue

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FastTrack MARKETING

A conventionalized statement intended to express some fundamental truth or principle especially as a basis for negotiation or action.
Face Realities or Limit Expectations

- A system or Formula must be implemented for success
- The marketplace demands respect for reciprocation – Do Research
- Foundation and Conviction are required before external marketing efforts
- Budget and Strategy must be implemented for efficient efforts
- Tracking is required for ROI and future planning

Formula For Success In Elective Surgery

- Assess
- Implement
- Test
- Track
- Modify

“A system is always more profitable than occasional or episodic activity.”

Research

- Research your market
  - Demographics – opportunities and limitations
  - Competition – differentiators and positioning
  - SWOT analysis – old but effective
Foundation

• Assess, Implement, Test, Track, Modify

• Assess
  • How are current patients acquired
  • Internal efforts
  • External efforts
  • Plan how you want to position and differentiate yourself

Foundation

• Assess, Implement, Test, Track, Modify

• Assess
  • Conversions
  • Personnel – take an honest look
  • Tracking Tools – you should know conversions at any given moment
  • Patient flow vs. best practices
  • Time management
    • Allowance
    • Training

Foundation

• Assess, Implement, Test, Track, Modify

• Assess
  • Educational Tools – Content, collateral, web
  • Follow up system/recall system
  • Referral program
**Foundation**

- **Implement**
  - Make changes where needed
  - Add collateral and educational tools
  - Transfer and train personnel properly
  - Make Decisions
- **Test**
  - Try the new efforts
  - Test conviction and enthusiasm for the formula
- **Track**
  - Tick Sheets, CRM, EMR, Word Doc report...
  - Find out where you are and compare it to where you were
  - Compare to industry leaders

> “I don’t care much for best practice. I care about conversions. That’s why I test.” — Michael Aagaard

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**Foundation**

- **Modify**
  - Be open to change – big or small
  - Be modest in that you might need change
  - Be confident that you can change
  - If you don’t have the right personnel in place, now is the time for change
- **Make Decisions**
  - This is where practices most often fail

- Start over from Assess

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**Budget**

- How much money is enough?
  - How do we set a budget that fits our goals?
- How do we know if a marketing budget is necessary?
  - Short answer: it is!

> “Half the money I spend on advertising is wasted; the trouble is I don’t know which half.”
  - John Wanamaker

> It’s clearly a budget. It’s got a lot of numbers in it.
  - George W. Bush
Budget

- Industry standard for medical marketing is 1 - 10% of actual or projected revenue
  - Aggressive: 8-10% (typical for new business phases)
  - Mild: 4-7% (typical for medium established businesses)
  - Calm: 1-3% (typical for highly established and maintaining)
- Formula assumes 10-12 percent margins after expenses

Make Decisions

Strategy

- The strategy guides the overall direction and is based on policies and goals set by senior management
- Tactical Plan
  - This is “How” the strategy will be accomplished
  - Media, messaging, internal procedures and personnel training; these actions combine to ensure the messaging used in advertising is effective in bringing patients to the practice for services
- Strategic Plan
  - Plans, Programs and Projects needed to accomplish the Goals

Strategy - Messaging

- Messaging – Branding vs. Targeted
  - Branding – pull tactic
    - What remains after the marketing has swept through the room
    - The underlying message of what, who, how and why
    - Branding alone is usually for large budgets with repeat buys
  - Targeted Messaging – push tactic
    - Promotes a brand’s products or services in the market
    - Can influence a customer’s immediate decisions
    - Usually much more cost effective
    - Employ Calls to Action (CTAs)
Strategy - Messaging

- General Practice Messaging
  - All medical services in a gen
- Elective Messaging
  - LVC, ICL, RLE, Inlay, Advanced IOL, Blephs, Injectables, Aesthetics, Cosmetics

Strategy - Media

- The Correlation between Media and Messaging
  - The messaging used for ads will be determined by three factors:
    1. The audience we are attempting to communicate with in any given ad
    2. The medium chosen to deliver the message
    3. The Calls to Action available for each given ad

- Media Options
  - Web, print, radio, TV, social, streaming, video, events

Tracking – Goal Setting

- Set Real Goals
  - **Real** - Expand overall patient visits and revenue by at least 10% in the next 12 months
  - **Subjective** - Increase overall market visibility and awareness
Tracking

- Track Weekly, Monthly, Quarterly and Yearly
- Leads – by source and campaign
- Conversions – by tools and by personnel
- Surgeries/Procedures
- Non-candidates
- Social interactions
- Referrals

"What you prefer or what your designer prefers doesn't matter if it's not getting you conversions."
-- Naomi Niles

Tracking - Analyze

Tracking – Outflow vs. Inflow

- What is your ROI?
  - Revenues – Expenses?
- What is your cost per acquisition?
  - Cost per lead
  - Cost per procedure

- Implement the formula
  - Assess and Modify – Then start over
  - Establish longer goals and budget plans using data acquired
Most Common Barriers To Success

- Decision making
- Failure to track
- Failure to commit
- Reversion to old habits – failure to adapt
- Getting caught in the clichés
  - Great is the enemy of good
  - Paralysis by analysis
  - Lack of outflow equals lack of inflow

Review – Sports Analogy

- Assess, Implement, Test, Track, Modify
- Make Decisions
  - Before you get in the game
    - Learn the fundamentals
    - Practice
    - Game plan
    - Track the stats
    - Review the plays
    - Review the players
    - Adjust the game plan
- Make Decisions

QUESTIONS???
Thank You
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