

Issue: April 2005

## A Roadmap for Success with LASIK

Committing to five basic principles can make your refractive practice thrive.

**BY PAUL M. STUBENBORDT**

What is the secret to having a successful LASIK practice? Is it experience? Is it location? It's my belief that success comes down to following five principles, most of which you already know. But surprisingly enough, some clinics only practice a couple of them.

These five principles are: hiring a refractive coordinator (RC), picking the right advertising media, creating realistic expectations, adopting the latest technology, and implementing good customer service. Here, I'll offer strategies for using these principles to enhance your LASIK practice.



### A Before and After Picture of a Practice

I have been affiliated with a Midwest clinic for about 2 years now. When I first arrived the clinic's volume was around 15 eyes per month. Not only were surgical volumes on the low end, but the average selling price (ASP) was less than \$1,000.

This clinic had worked with several consulting agencies in the past, but none were able to deliver. They were using a respected marketing agency for creative needs, an agency that they still use today.

The first thing I did when I was offered the position as marketing director was to spy call the clinic. The person that answered the phone first asked if I had a special type of insurance that would allow me to have LASIK at a discount rate, (\$900 per eye.) Then there was silence, no questions, nothing. The person didn't know anything about custom

LASIK or wavefront technology.

The few phone calls that came in were quickly downgraded to a low ASP, and the employees answering the phones never asked the patients if they would like more information about the procedure. After I took the position, I corrected this problem right away by hiring two refractive coordinators to take over the telephones.

Second, this clinic did not have custom, but their surrounding competitors did. Within a month or so we had wavefront technology.

Third, advertising was in the wrong media. Tower Cam sponsorships, overnight cable, and dot-com listings. None of these things sparked direct response.

The practice did begin a small radio campaign before I started, but gave up because no surgical cases were being generated due to a lack of poor refractive coordinator skills. Radio was quickly revitalized, the phone calls came in, and the surgeries

were being scheduled.

The doctor always had good results, but adding custom helped his outcomes and generated happy patients, which set up good expectations for patients that followed.

Lastly, the clinic needed an overhaul on customer service. My biggest pet peeve is calling a clinic and getting an automated phone tree. So, you end up waiting before you get a live person or end up in a general voicemail.

You would be surprised at the number of clinics that don't have their phones covered to help expedite the process. I have left messages asking for information about LASIK, and never had my calls returned. So I quickly made the rules: three rings max, all appointments within a week, and surgery scheduled as soon as possible. This clinic's volume rose to over 100 eyes per month in only 4 months and had an ASP of \$1,850. If your clinic wants to grow to become a market leader, follow this path to success.

### The Refractive Coordinator

The RC is the second most important employee in a LASIK practice, behind the surgeon. No matter how small a LASIK practice you may have, it is always a good idea to have a refractive coordinator. Even if your monthly volume is small, you want a constant communication link for patients to speak to about your clinic's refractive program. This person will answer inbound telephone calls, educate patients on refractive procedures, discuss financing options, and schedule upcoming surgery. In larger clinics that do 50 plus eyes per month, it might be a good idea to have an RC answering phone calls, scheduling consultation appointments, and a second RC meeting with patients and scheduling surgery. In mega-markets such as Dallas or Los Angeles, there might be three or four RCs on the phone, and two or three RCs meeting with patients during consultations.

In our practice, we perform about 80 eyes per month, and have three RCs in total. All three answer the phone, one primarily works with consultations, and the other two help with financing, patient consent, and scheduling. We want to keep the phones covered.

Two ways to determine if you do have enough RCs is the aforementioned three rings rule, and a no-more-than-30-seconds-on-hold policy. If these rules are broken because of an overload, hire another RC. Refractive coordinators may also take on the responsibility of marketing and advertising. Usually, in a smaller market where competition is minimal, RCs might meet with an optometrist to build referral programs, or meet with local businesses to build special preferred LASIK programs as an added incentive for their employees. Some RCs might work with local media groups to come up with advertising strategies such as radio scripts and print designs. Usually in larger markets, LASIK clinics have an internal marketing specialist or outside consulting group, or both sometimes. The core of an RC's role should focus on inbound calls and consultations.

Sometimes a practice might try to delegate other job duties to the RC, which can be strategically dangerous. When I call a practice wanting information about LASIK and get a recording stating the RC is in surgery and won't be returning calls until Monday, I sometimes wonder why that practice has any surgical cases to perform.

When hiring a refractive coordinator, look for someone with a minimum of 1 to 2 years sales or customer service experience. This person should have an energetic personality and excellent communication skills.

It's not a good idea to pull your certified ophthalmic assistant or billing person to take over this important role. It takes a special person with a good sales mentality to turn those inbound calls into consultations, and those consultations into surgeries. Simply put, the RC makes things happen, and if they don't convert you could be losing \$150 in advertising costs just to make

the phone ring, or \$4,000 for a missed surgery opportunity.

Sometimes if the RC is poorly trained, he or she might forget or not even bother asking if the patient would like to come in for a consultation. Asking a patient to come in for a "free consultation" is the first step in the sales process for a LASIK clinic. If this question is not being asked, you may want to re-evaluate your refractive coordinator's job performance.

The refractive coordinator is a sales position, and as such you must compensate an RC for an above-average job performance. These are very talented individuals who need to see personal financial growth that is directly tied to the success of the practice.

In successful LASIK practices, depending on market size, RCs earn a base salary between \$20,000 and \$60,000 with a monthly bonus structure of \$100 to \$1,000 for hitting their goals.

Here are some consulting tips RCs should be employing:

- Listen to the patient. You need to address their personal issues.
- Take control of the conversation. Ask closed end or "Yes/No" questions.
- Ask the closing question: "Would you like to come in for a consultation to find out if you are a perfect candidate for the procedure?"
- Build a rapport with your patients. Find a common interest such as golf, fishing, or reading.

## Advertising

Fortunately, several avenues lead to LASIK marketing success. Radio, newspaper, television, direct mail and the Internet are among the most popular. Radio can work in all markets. Looking at the LASIK demographics for our market, most patients are between 25 and 50 and earn more than \$50,000.

As these people work full-time, most of them go to work early in the morning. Commute times have risen in the past decade, which means people will listen to the radio longer and will have a better chance of hearing your radio commercial. Radio is also usually less expensive than other forms of media.

For instance, in our market the local newspaper charges about \$35 per column inch for a full-color Sunday ad placement. For a quarter page or 32.25 column inches the total cost would be \$1,128.75. In Dallas, the same size ad would cost \$15,000 and wouldn't produce nearly as many calls for the same amount of money invested in radio. I think one reason is that LASIK patients are a younger society. Many younger people are reading online news, whereas older demographics are leaning towards newspapers in most markets.

However, newspapers still tend to be one of the most popular forms of LASIK advertising, and I encourage it because it blends well with radio and it gives potential patients something tangible to hold.

Also, television just before and after prime time works wonderfully, but again this can become very expensive. In our market, we run spots on Jay Leno, David Letterman, and the evening news. The only problem we run into is that our office is closed during these times. So, make sure you have a very professional answering service to relay the leads that come in after hours.

We have also performed LASIK on several local television and radio personalities. When the morning DJ gets on the air and talks about our clinic and how he trusted our clinic to perform LASIK on his or her own eyes, this creates a powerful message.

This is the power of third-party endorsements, which I believe to be the most powerful message a clinic can broadcast. We performed LASIK on a local meteorologist in July of 2004, and several months later we still receive phone calls from her three-

part news story detailing her own experience with the procedure. Check with your local media rep to see if they know a DJ or television anchor that may want to have free LASIK in exchange for testimonials.

Some doctors might say they can't afford to advertise, but this is a serious LASIK operations mistake. This inaction has led to the downfall of many clinics. How does one expect to make the phone ring if people don't know about the practice? If you want to increase or maintain your LASIK volume, you must be willing to advertise. I prefer not to have a fixed annual advertising budget. Instead, set a volume per-month goal and decide how much you are willing to invest in advertising to reach this goal.

In smaller markets like ours, we typically spend about \$144,000 annually or \$150 per eye for advertising which is adequate for our little town of 60,000. In big urban areas like Dallas or Los Angeles, you should plan on spending much more. Some doctors in those larger markets spend between \$1 and \$5 million annually and perform between 3,600 and 12,000 cases annually. Of course, their cost per eye for marketing is much larger, usually between \$280 and \$420.

I'm still hearing commercials over the radio saying, "Dr. John Doe was the first doctor to have wavefront-guided LASIK, and the first to have performed LASIK in the area." Although experience does have some appeal, there are better ways to fill up a 60-second time slot. It is important to talk about technology and how results have improved dramatically, but leave the egos on the doorstep. As the great advertising giant David Ogilvy said, "We are not making ads to win awards, but to produce sales, to influence buyer behavior. The day we lose sight of this reality is the day we are lost."

The truth is, most doctors have extensive experience and the public knows this. The public wants to hear about new technology, results and affordability. With the advent of wavefront and femtosecond technology, LASIK has never been safer or more precise for the patient. People who have held out this long for LASIK have been waiting for the technology to improve. This is why it is now a good idea to have technology and results in your marketing message.

Here are some advertising tips for your practice:

- Advertise on the radio early and late drive times. This is when you will catch most of you demographics going to and from work.
- Have a strong message to entice patients to want to call -- direct response advertising.
- Never stop advertising if it produces results. You will lose momentum if you stop.
- Talk about new technology and results.
- Make reference to various financing options that your practice offers to fit patients' budgets.

## Expectations

Good surgical results are a byproduct of patient expectations. You know the old saying, "if something good happens, they tell three, but if something bad happens, they tell 10." This is why it is important for doctors and refractive consultants to give patients realistic expectations. If the patient is 41 and -1.5 sphere, I cringe when I hear, "you might need reading glasses after the procedure." What the patient really hears is, "This is like any other warning, they have to say it to protect themselves, but its not going to happen to me."

When this happens, a practice is setting itself up for trouble. For example, a certified public accountant on post-op day one is very upset. He tells you how he could just take his glasses off to read before, and now he has just traded one pair of glasses for another.

I tell patients approaching 40 they will need reading glasses after the surgery, maybe not the next day, but very soon. I then ask patients why they want to have the procedure performed, and what do they expect after surgery. If they tell me they want better vision, I ask if they want better distance or up-close vision. Most of the time they will tell me both, and this is where I reiterate the fact that LASIK will improve their distance vision, but not their reading vision, and if they are slightly nearsighted it

will suffer. This way, when it happens they are prepared and accept it as being normal.

When wavefront-guided LASIK was first introduced, some doctors saw their enhancement rate skyrocket. The results were quite good, but patients expected "super" vision. If the patient had 20/25 visual acuity after surgery, they would be upset. They expected 20/20 or better for the extra money they paid, and now they want an enhancement to fine-tune their eyes for added clarity.

How many doctors would have performed an enhancement on a patient with 20/25 visual acuity after a standard LASIK procedure? But the added pressure from unrealistic patient expectations has influenced some doctors. This can be eliminated by giving patients realistic expectations.

## Technology

Several LASIK Web sites provide extensive amounts of information to educate patients on various types of technology. Most patients do their homework, and they know how advancements in technology such as custom LASIK might benefit them.

In our clinic, 60% of all procedures are custom, and we expect that number to increase now that we have an FDA laser approval for hyperopia. I have seen our numbers dramatically rise since we have upgraded our laser to the custom platform. Within a few months our investment was paid for, and our ASP was \$550 more per eye. I believe if a practice doesn't offer wavefront-guided LASIK, it probably doesn't have its patients' best interests in mind. In your advertising message it's always a good idea to announce that your practice has state-of-the-art technology, with custom. Patients love to hear, "the best technology available today." For LASIK practices, having the technology to compete is important. The technology factor is directly linked to results and marketing factors as well. How can a practice expect to advertise a laser that's three generations old, or expect quality results from a laser without an eye tracker or large optical zones? If you don't have the quality technology, you're not going to be able to compete.

## Customer Service

This is key to any successful business. In our office, we offer patients drinks and snacks in our waiting room. Every employee in the clinic greets patients with a smile and addresses any concerns ASAP. We also plan to have Internet capability in our main waiting area for checking or sending e-mails.

I visited a practice last year that really took customer service to the next level. The practice is in a market with a population of 120,000. They have two other competitors that I'm aware of in the same city. All of the practices have wonderful technology, but the practice that I visited went one step further. When you walk into the clinic, you get the feeling that you are walking into a high-tech, state-of-the-art facility. They serve coffee and snacks in the waiting room, which also has armchairs next to a fireplace. The coffee is gourmet and the muffins and cookies are name brand. From the consultation area, the patients sit in very comfortable chairs and have a view of the laser suite, which is just 5 feet behind them. Most impressive was the politeness that the staff showed towards potential patients. The refractive coordinator was as educated on LASIK as anyone I have ever seen. This practice performs about 100 eyes per month, and charges a premium price with an ASP well above \$2,000 per eye. They may provide some extra touches, but they make up for it with their ASPs.

Here are some customer service strategies:

- Keep reception waiting times to 10 minutes or less
- Offer your patients something to drink
- Pre-warn patients on waiting times when they first call the practice. Make sure they are aware it could take 2 to 4 hours for the dilated exam.

- Have an upbeat personality, "Service with a smile."

## Bringing It All Together

There is a lot to juggle when it comes to marketing a LASIK practice. If you are in a medium-sized market and plan to grow, I would suggest hiring a professional advertising firm. It would be responsible for the production and media buying of your marketing campaign. Some consulting agencies will assist with training the refractive coordinator for optimum productivity. Try to find a consulting group that has refractive experience, this will be a tremendous help.

*Paul Stubenbordt is marketing director of the McGlothran Eye Institute, located in Terre Haute, Ind. He can be reached by phone at (812) 478-5550 or e-mail at [pstubenbordt@mcglothraneye.com](mailto:pstubenbordt@mcglothraneye.com).*

Contact Lens  
SPECTRUM

OPTOMETRIC  
Management

CONTACT  
BUSINESS

Retinal  
PHYSICIAN

© Lippincott Williams & Wilkins VisionCare Group  
All Rights Reserved - Terms and Conditions of Service