Innovative Marketing Programs to Take Your Center to the Next Level of Profitability and Growth

Alan A. Ayers, MBA, MAcc

Urgent Care Success Factors

- Location/location: retail adjacencies, traffic visibility, consumer density and demographics
- Market Coverage: marketing scale, operating synergies, payer leverage, provider bench
- Insurance Contracts/Credentialing: in-network, all major payers in the market
- Mass Media Advertising: widespread brand awareness, frequent messaging
- Grassroots Marketing: dedicated staff, community involvement
- Customer Service Culture: experience to spur repeat visits, positive word-of-mouth

Urgent Care Success Factors, cont'd.

- Lower Cost Staffing Model: part-time, mid-levels, shift flexibility, control costs (PTO, benefits), cross-training
- Extended Operating Hours: consistency, sticktuitiveness
- Smaller Center Footprint: greater flexibility in finding retail space, more efficient use of space
- Lower Cost Buildout: reduces up-front capital, ongoing depreciation hit to P&L
- Integration of Occupational Medicine

Reasons for Urgent Care Failure

- Bad Location—lack of visibility, high rental rates, too much competition, absence of consumer demand.
- Payer Contracting—not getting contracted with major payers, soon enough, or at unfavorable rates.
- Marketing—not spending enough money, choosing ineffective tactics, or not aggressively marketing the center starting with pre-opening.
- Staffing Costs—not controlling costs including staffing to capacity instead of demand and not cross-training employees.

Reasons for Urgent Care Failure, cont'd.

- Facility Costs—spending too much money on the build-out, going "all out" on furnishings, fixtures and equipment.
- January or First Quarter Opening Date—effectively missing out on the January-March "busy season."
- Exhausting Working Capital

Urgent Care Seasonality Curve



Value of Positive Patient Experiences

- Urgent care is in the "patient satisfaction" business—in consumer eyes comparable to retailers, restaurants, banks and other service providers.
- Long-term success requires capturing *repeat business* and generating *positive word of mouth*.
- Patients evaluate the *quality* of their urgent care visit based on *clinical outcomes* and their *feelings about the experience*.
- Patients who don't like the experience provided, don't value it, or don't think it meets their needs or expectations won't come back.

New Era of Word of Mouth Marketing



We're Not Gossiping. We're Networking.



- Patients with negative experiences will tell others, complain to external agencies, and switch to competitors.
- Internet social media has accelerated the diffusion of good and bad experiences.
- Reach has expanded from a handful of "real" friends to potentially thousands of "virtual" friends.

Online Feedback Sets Service Expectations



Best of Yelp: Chicago - Urgent Care



See More

Spurring Positive Word of Mouth

- Starts with a good patient experience.
- Patients must have a sufficiently good experience to:
 - Return for services themselves.
 - Recommend the urgent care to others.
- A "good experience" is defined as:
 - Earned with the co-operation of patients
 - Delivers value for the price paid
 - Exemplifies "Golden Rule" behavior
 - Fosters trust and engages employees

Differentiation in the Sea of Sameness



Consumers generally view all urgent care centers as "equal." Few centers have established differentiated brands.

Southwest Airlines

- The Great Fare War of 1973
- Dallas to Houston:
- \$13 Braniff Fare Sale
- \$17 Operating Cost
- \$20 Southwest Regular Price
- \$26 Southwest Promotion*
- *80% of passengers chose the higher fare
- 32 consecutive years of profitability



Southwest Airlines Diffrentiation



Differentiation is Not...

- What's important to doctors
- What patients can't see or understand
- Board certified physicians
- Digital x-ray, CLIA-certified lab, and/or EKG on-site
- Electronic medical record
- In-network insurance provider





Differentiation: Facility

- Patients who lack formal training to evaluate medical decision making look to the *physical environment* for *cues*.
- Clinical competence is generally assumed so patients focus disproportionately on *tangibles*:
 - Décor, aesthetics, and layout of the physical facility.
 - Condition and cleanliness of furnishings, fixtures and equipment.
 - Appearance and dress of providers and staff.
 - Availability of Wi-Fi, power outlets, current magazines, television programming, children's play areas, coffee or bottled water, etc.
 - Seating arrangement, spacing, and type of seating.
 - Signage and messaging.
 - Restrooms

Focusing on Tangibles: Environment of Care









Tangibles: Environment of Care, cont'd.



Physicians Quality Care, Jackson, TN

Patient Concierge

Free Wi-Fi

Multiple Waiting Areas:

- 24-Seat Movie Theater
- Reading/Lending Library
- Children's Play Areas

Refreshments Offered:

- Fresh Popcorn
- Slushy Machine
- Packaged Snacks
- Gourmet Coffee
- Soft Drinks



Web Check-in/Mobile App



Differentiation: People





NORDSTROM



WALT DISNEP

- Marketing is understanding consumers.
- Fantastic service organizations have "fulltime" and "part-time" marketers.
- "Part time marketers" include retail clerks, bank tellers, airline ticket agents, and appliance repairmen.
- *Everyone* should look at how *everything* in the organization *impacts the customer*.
 - A *"moment of truth"* is any instance of contact or interaction between a customer and a firm.

Employee Attitudes



- Health care has an inherent advantage over other service industries—people go into health care to help people.
- Employee attitudes affect patient attitudes—seek employees with a positive attitude.
- Leading service firms expect employees to smile and project a friendly demeanor.
- Emotional labor of appearing happy, even if you aren't, is to assume a role—it's easier to act happy than be happy.

Language, Legends, Stories and Heroes

"The Orange Book is a little book with a big goal: to redefine the patient experience by performing **welcoming, respectful, skillful** actions—every colleague, every day, every location."



Drivers of Urgent Care Visits

- Insurance referrals
- Drive-by visibility
- Clear signage
- Repeat visits
- Word-of mouth
- Paid advertising
- Grassroots tactics
- Employer referrals
- Physician referrals
- Media exposure
- Internet search







Differentiation: Community Engagement







"Hey Mom, I need a physical by Monday!"

Let The Little Clinic help camp and school sports physicals *for only \$29!*

- No Appointments little or no waiting time
- Located inside your neighborhood supermarket
- Open 7 days including nights and weekends
- Professional, caring Nurse Practitioners



Located inside select Kroger Supermarkets See reverse side for locations.

For additional locations and general information, visit www.thelittleclinic.com

Conventional Advertising Limitations

When properly executed, grassroots marketing can be less expensive and more effective than paid advertising:

- Multi-tactic campaigns require scale
- It's expensive to get adequate frequency of exposure
- It's inefficient to reach people unlikely to use the center
- It's difficult to measure Return on Investment

ROI: Direct Response vs. Brand Building



Grassroots Marketing Activities

- Primary Care/Specialist/Retail Clinic Referrals
- Chambers of Commerce
- Community Organizations
- Community Events
- Apartment Complexes
- Hotels/Motels
- Convention/Visitors Bureaus
- Health Clubs and Parks/Recreation
- Churches/Religious Congregations
- Local Schools (PTA, Athletic Boosters)
- College Campuses
- Ethnic Groups/Advocacy Organizations



Center Grand Opening



Center Open House



Value of a Mascot: Schools and Events



Event Participation Requires Engagement



- Location/Foot Traffic
 Attract People to Booth
- Share Message Face-to-Face
 Meaningful Take-Away

Engagement via Prize Wheel



Game Attraction





Contact Information



Alan A. Ayers, MBA, MAcc Dallas, Texas aayers@ucaoa.org www.alanayersurgentcare.com