

Ashlie Barefoot Malone, MBA, JD, COE

arketing efforts such as advertising, social media, and having an impactful online presence can be effective at growing patient volumes and should remain an integral part of every practice. But what if you could increase surgical volumes with patients who were already diagnosed, ready for surgery, and who came through your doors already excited about your practice and the great care they would receive—before you even met them?

Since opening in 2008, this is what our practice created by building a strong optometric referral community. Today, approximately 80% of our surgical patients are referred from community optometrists. Here's how we did it—and how you can, too.

## STEP 1: BEGIN WITH A PLANNING TEAM

A sustainable referral network will integrate the types of activities to which your local

community responds well. Since all communities and their competitive environments differ, success requires planning that includes your practice's leadership team.

Do you have a list of optometrists in your community? What are your goals: To build practice volumes? To increase surgery volumes? To grow a targeted service line, such as cataracts, LASIK, or aesthetic services? To get one or two of your surgeons busier?

We can't decide what road to take if we don't know where we are going.

#### STEP 2: GET MDs ON BOARD

The referral network will not be successful without MD involvement. Referring optometrists are doctors. They provide quality medical care to patients. They expect, and deserve, to have a trusted relationship directly with the practice MD. If your surgeon feels differently and is fighting you on this point, then please show them this article and let me be the one to tell them that

THIS ABSOLUTELY WILL NOT WORK WITHOUT YOUR INVOLVEMENT.

## STEP 3: FIX INTERNAL PROBLEMS FIRST

You would never launch an advertising campaign if all your phones were down. Get your internal systems ready first.

Is your practice ready for referrals? Are these patients tagged as referred so your team knows? Is the referring doctor's office information loaded in your practice management system correctly so you can send back a letter? Do you send that letter after the patient's evaluation and surgery? Can new patients be promptly scheduled? Is your co-management consent form ready to be signed by the patient at post-op day one and faxed back to the co-managed provider? Does your biller understand how to use the -54 co-managed modifier and how to bill co-managed claims? Do they know how to educate the referring optometrist's biller on any questions about the use of the

-55 (post-op) modifier? Does your entire team understand that these are referring partners?

#### STEP 4: SEE #2 ABOVE

This one requires work on the front end but gets much easier as your network takes off.

In the beginning, it is imperative that your MDs are the ones visiting the optometrists in their offices, shaking their hand, introducing themselves, and talking with them about the type of care they provide to shared patients. The administrator or outreach coordinator can call the optometrist's office and ask about the best time to stop by with the MD to meet the optometrist. Take business cards, referral pads, and brochures, and make it short and sweet.

I refer to this as the "dating" phase. Optometrists are smart cookies and they are being courted by every MD practice in your community. Show them how you are unique, different, and genuinely care

about this relationship. Your MDs should give them their personal cell phone numbers and email addresses and encourage them to call at any time. One of our most valued referring doctors told me her favorite thing about our MDs was that they gave her their personal cell phone number and answered every time she called, no matter what.

#### STEP 5: EDUCATION

One of my favorite things is hosting educational events for our referral network. MDs can provide optometrists with continuing education (CE) credit by having the session accredited by the local licensing board. In general, a one-hour educational talk may be approved for one hour of CE credit.

Be consistent with these CE events so that they become expected and enjoyable. Your attendance will skyrocket when optometrists realize that you are invested in them and committed

to an ongoing relationship. These talks can be hosted over dinner and sometimes even sponsored by vendors to provide a low-cost, fun way to build relationships while accomplishing multiple goals.

#### STEP 6: MAINTENANCE

Live it, breathe it, believe it. These are relationships. They require ongoing maintenance, creativity, and respect, but the reward is worth it. We love our referring partners and are so thankful to share in the care of patients with them.

With a little work, you will, too. *AE* 



Ashlie Barefoot Malone, MBA, JD, COE (843-797-3676; abarefoot@ carolinacataract.com), is

practice administrator, Carolina Cataract & Laser Center, Ladson, S.C., and a licensed attorney in the state of South Carolina.

# "

What if

you could increase surgical volumes with patients who were already diagnosed by another doctor, ready for surgery, and who came into your doors already excited about your practice and the great care they would receivebefore you even met

## OPTOMETRIC REFERRAL COMMUNITIES AS AN EFFECTIVE GROWTH STRATEGY

Building an optometric referral community can be one of the most effective growth strategies a surgical practice can adopt. Your surgeons get to partner with some of the kindest and most talented eye doctors in your community, and these patients are referred to your practice already diagnosed and oftentimes ready for surgical care.

Labor statistics estimate that as of the year 2014 approximately 41,000 optometrists live in the United States<sup>1</sup>, yet only 19,000 ophthalmologists<sup>2</sup> are currently practicing. With almost 74 million baby boomers alive today<sup>3</sup>, exploring more targeted, efficient means for cultivating new patients is the key to practice sustainability and profitability. Building referrals through the optometric community not only makes sense; it infuses ophthalmic practices with a targeted patient base that is hand-selected and personally referred by trusted primary eyecare providers.

### SOURCES

<sup>1</sup>https://www.statista.com/statistics/448742/eye-care-professionals-in-the-us-forecast/

<sup>2</sup>https://www.aao.org/newsroom/eye-health-statistics

<sup>3</sup>http://www.pewresearch.org/fact-tank/2018/03/01/millennials-overtake-baby-boomers/

them?