Introduction

The hospital and health system ecosystem is in a state of deep transformation, where regulatory pressures have led to the rise of Accountable Care Organizations (ACOs); the narrowing of provider networks; the growth in healthcare IT expenditures; the shift towards population health management; and, significantly, hyper-competition.

In 2015 alone, we have seen major deals being made, from Intermountain Healthcare’s full ownership of Amerinet, to Meridian Health and Hackensack University Health network’s merger, to the expansion of the working relationship between Lancaster General Health and the University of Pennsylvania Health System. In an environment where “bigger is better” seems to be the key to survival, the fate of the independent hospital is particularly grim.

Surviving such sweeping changes, regardless of size, will require critical transitions not only in clinical processes, patient procedures and technological systems, but also in the marketing and outreach performed by hospitals and health systems. To be sure, competition for patients will be an ongoing challenge; but hospitals and health systems are also facing increasing competition for Continuing Medical Education attendees, new Physician hires and Physician referrals. It is precisely in these areas where healthcare organizations need to examine and employ the strategies and tactics leveraged by other industries. By investing time and resources and utilizing the tools and data outlined in this whitepaper, hospitals and health systems can gain an edge over the competition in areas previously overlooked.
Maximizing Continuing Medical Education

Hosting successful Continuing Medical Education (CME) activities is an integral ingredient of a healthy hospital or health system. CME events fill a triple role: as an important source of knowledge and learning for Physicians and other healthcare professionals, as a PR tool, and as a source of revenue for hospitals. Whether delivering Formal Learning Activities or Informal Learning Activities, there are tremendous opportunities for hospitals and health systems to maximize the benefits of CME programs.

Findings from the 2013 ACCME Annual Report\(^1\) highlight broad areas where improvements can be made:

- Physician attendance decreased 3.9 percent
- Non-Physician attendance increased 7.7 percent
- The number of Physicians who attended hospital CME activities: 22 percent
- Physician attendance ranked highest in Regularly Scheduled Series (33 percent) and Internet Enduring activities (30 percent)

In 2013, hospitals generated more than $208 million in revenue from CME activities. It is important to note, however, that hospitals also conducted 47,843 CME activities — nearly double that of nonprofit Physician membership organizations, which conducted 26,176 activities.

Increasing CME Attendance

*Improve Online Offerings*

The factors driving the decrease in Physician CME attendance can be inferred from the elements that attract Physicians. A 2013 survey by Elsevier’s Office of Continuing Medical Education (EOCME), AcademicCME and ArcheMedX demonstrated that 97 percent of clinicians planned to increase their participation in online continuing education programs. ACCME’s findings showed that this was already the case in 2013, when Physician attendance in live online CME activities increased by 23 percent.

These findings present unique opportunities for hospitals and health systems. While in-person courses and regularly scheduled series were well-attended in 2013, there is a growing demand by Physicians, non-Physicians and medical students for web-based learning in medical education. For practicing Physicians and other clinicians, online programs in the format of cases, videos, slides and innovative virtual courses are a welcome convenience to healthcare providers who are increasingly busy and pressed for time. It also addresses one of the top reasons for low Physician attendance to CME events: location. Additionally, the lower cost of web-based CME activities can also attract more Physicians who work at hospitals where budgets are constricting.

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Marketing to Physicians

Marketing an online CME activity to Physicians and other healthcare providers requires a complementary multi-channel marketing strategy. Hospitals and health systems will need accurate healthcare provider data on Physicians, Nurse Practitioners and other clinicians to reach the right audiences. Utilizing healthcare provider databases from Healthcare Data Solutions provides the kind of deep data required to target specific audiences by specialty, location, organization type and more. With accurate provider information, healthcare organizations can recruit attendees through a series of contact points — from in-person invitations and telephone conversations to direct mail and follow-up letters.

Here, it is critical to bear in mind that successful recruiting events typically require at least two touch points, and that in-person meetings and phone calls are proven methods — especially when done by a Physician leader at the hospital. Email services from a third-party provider like Healthcare Data Solutions should also be leveraged as a third touch point to help fill seats, drive improved outcomes and reduce marketing costs.

Leverage Social Media

Like it or not, social media plays an integral role in the marketing activities of any organization. Recent estimates of social media use show that 45-90 percent of medical students, residents and fellows use social media; 67 percent of practicing Physicians use Facebook and 48 percent use Twitter. Moreover, recent surveys show that 65 percent of Nurses and 60 percent of Physicians use social media for work.

A recent survey by the Mayo Clinic on the use of social media during one of its CME events supports the growing acceptance and use of social media among healthcare professionals. The Clinic’s survey findings revealed that 89 percent of respondents have used at least one type of social media. Among those respondents, YouTube, Facebook and Skype were the most used social media channels. Attitudes toward social media were generally more favorable among participants aged 20-49.

Together, these findings reveal that there are opportunities to enhance CME attendance by marketing programs through social media — particularly when trying to engage more youthful, technology-savvy healthcare professionals. Utilizing social media to promote CME activities will become increasingly worthwhile as more Gen Y medical students become practicing Physicians. Healthcare organizations should also be looking for ways to promote the program and engage CME attendees through social media during the activity. Here, hospitals and health systems can look to tradeshows and other events for ways to incentivize participants who tweet and post to social media at a CME activity. Be sure to create hashtags for your event and promote them to attendees throughout.

Again, reaching this market will require accurate data that includes more than just a name and address. It is imperative that hospitals and health systems utilize a database that includes background information such as age and educational background.
Improving Attendee Satisfaction

*Be Relevant and Vital*

According to a Pri-Med study of Physician CME preferences, 98 percent of respondents cited the clinical topic as the most important factor in deciding whether or not to attend a CME conference or meeting.²

When developing or enhancing a CME topic, it is important to consider that Physician specialists and generalists have different wants. According to CME LLC, specialists tend to want to obtain knowledge about a very narrow topic area, but generalists prefer a little information about a broad variety of topics. CME LLC has also found that Physicians prefer data-intensive sessions, time for Q&A, and program handouts that they can take back and share with colleagues.³

Hospitals and health systems can further refine their CME topics by surveying past attendees — and reaching out to new ones through the use of a healthcare provider database. Here, healthcare organizations should think of ways to incentivize survey participation. Gift cards, CME discounts, the chance to win special event tickets are all worth consideration.

*Measure Results*

Measuring the impact of recruiting efforts is an essential part of maximizing CME activities. Utilizing email services with built-in analytics such as open rates and click-through rates is vital for understanding responses based on messaging, timeframe in reference to the actual event, and special offers. Hospitals and health systems should develop before-and-after measurements — or enlist the services of a third-party analytics provider to do the analysis for them — to gauge the effectiveness of all recruiting tactics.

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³ Ibid.
Boosting Physician Referrals

Start with Clean Data

Building a strong Physician referral base is critical to expanding the patient base and revenues of a hospital or health system. According to the Annals of Internal Medicine, the average Physician refers to 229 other Physicians. Additionally, a New York Times article estimated that Physicians receive up to 45 percent of new patients by referrals. Even amid an environment where health systems are rapidly acquiring Physician groups to expand their referral networks, boosting Physician referrals is still critical to a hospital’s bottom line.

To achieve a healthy referral system, it is imperative that healthcare organizations standardize processes for managing referral relationships. This involves identifying high-value Physicians, understanding what services attract high-volume referrals, and developing Physician-specific marketing programs.

A four-step process utilized in many industries provides a good starting point for healthcare organizations:

1. Analyze market opportunities by geographic market and specialty
2. Analyze current referral base to understand penetration by specialty
3. Rank and segment Physicians by referral penetration and referral potential
4. Develop targeted marketing strategies to reach each segment

These types of analyses require accurate data. A healthcare organization’s internal database should reveal broad behavioral patterns, but correct data on location, ZIP code, affiliations and organizational capabilities are also necessary for deeper analyses and pinpoint targeting.

Maintaining accurate master Physician data can also be problematic for hospitals and health systems, given that the Physician landscape is also undergoing rapid and dramatic changes: A Healthcare Data Solutions analysis of over 1 million Physician records revealed tens of thousands of changes in location information and specialty designations over a nine-month period.

Amid such profound transformations, the most efficient and cost-effective way for hospitals and health systems to maintain accurate provider data is to rely on expert data companies like Healthcare Data Solutions to clean their database. Enlisting the help of healthcare data experts with analytics capabilities is another way for hospitals and health systems that lack the internal resources or capabilities to perform analyses to improve Physician referrals.
Creating a strong and consistent Physician referral base requires a marketing strategy designed specifically to attract Physicians. According to Becker’s Hospital Review, this will require most hospitals and health systems to adopt a strategic shift that directs a greater percentage of marketing resources on attracting Physicians rather than consumers. The value of developing a strong Physician marketing program is undeniable; most patients choose hospitals based on their Physician’s referral rather than consumer-directed marketing.

Physician marketing strategies in today’s environment must address at least two considerations: the conflict between employed and independent Physicians, and what Physicians actually want from a referral. With 60 percent of family doctors and pediatricians, 50 percent of surgeons and 25 percent surgical subspecialists now employed by hospitals and health systems, hospitals must reconcile the fact that employed Physicians are perceived as competitors. This can be addressed by developing different marketing tactics, policies and processes for employed Physician referrals and independent Physicians.

Hospitals and health systems that choose to make outbound referrals to community doctors as a way to expand both their Physician and patient base should be engaging those Physicians through targeted direct mail campaigns, meet-and-greet luncheons and events, and reciprocal referrals.

These campaigns should take into consideration the top factors driving a Physician referral:

| Medical skill of the specialist | 87.5% |
| Access to the practice and acceptance of insurance | 59.0% |
| Previous experience with the specialist | 59.2% |
| Quality of communication | 52.5% |

Physicians should be encouraged to leverage electronic health records (EHRs) to facilitate communication with referring Physicians. Most EHRs allow Physicians (and their staff) to send thank-you notes, letters of introduction and follow-up reports to other Physicians directly from the EHR.

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The concept of customer relationship management (CRM) is only beginning to take hold in the healthcare industry. Hospitals and health systems embracing CRMs have recognized the need for such tools in an environment where accountability and population health management are the new norms. However, according to a Krames StayWell report, only 15 percent of hospitals use a customer relationship management (CRM) tool — and most do so to manage and develop relationships with patients rather than Physicians and other clinicians. But sophisticated customer relationship management involves strategies to boost the bottom line by enhancing relationships with customers (both patients and Physicians) and improving health outcomes.

The return on investment of a CRM is perhaps the most compelling reason to use it: one healthcare provider reported to Becker’s Hospital Review that its $5 million CRM investment has yielded almost $17 million in revenues over a period of three years.

Using a CRM supports important revenue-boosting efforts such as Physician referrals. Through a CRM, hospitals and health systems can glean important insights to identify which Physicians to market to, what to market to them, and then develop a multi-channel marketing strategy for each market.

The effect of creating targeted campaigns that are highly relevant to specific audiences also has a boomerang effect on customer relationships: it builds trust and loyalty in an environment where neither is easy to obtain. It says, “You understand what I want and need” to customers and potential customers.

For Physician marketing, a CRM can be used to identify doctors with whom you want to build a referral base to take a tour of the hospital and show them new facilities. A CRM can also be used to target specific audiences for CME programs. The possibilities are endless — but will have significantly better results and be more effectively managed when utilizing a CRM tool.

Of course, a CRM tool is only as good as its data. If your Physician data is out-of-date, incomplete or full of duplicates, all marketing efforts will be negatively impacted. Hospitals and health systems can benefit from new solutions, such as Healthcare Data Solutions’ Healthcare Data on Demand app, which allows SalesForce® CRM users to access over 1.8 million robust and accurate healthcare provider records.

Emerging Trends

Accountable Care Organizations

An analysis of accountable care organizations (ACOs) in the Pioneer ACO program revealed that the growth rate declined slightly in 2014 but still showed a 12 percent increase overall. Today, there are an estimated 585 ACOs in the U.S. — and 160 different types, including the Medicare ACO.

Findings from a recent study evaluating the financial and quality outcomes for Pioneer ACOs revealed that the Pioneer ACO Model produced net shared savings of $134 million in 2012 and $99 million in 2013. Quality scores for ACOs rose significantly in 2013 for 67 percent of the quality measures.

Industry analysts are predicting the next stage in ACO development will be characterized by an increase in sophistication rather than an increase in numbers. At the same time, the Next Generation ACO Model gives participants stronger financial incentives to improve health outcomes and reduce expenses of Medicare patients through more predictable financial targets and greater opportunities to coordinate care and engage beneficiaries.

Hospitals and health systems should keep pulse of the ACO landscape, particularly as ACOs continue to evolve in ways that reduce costs and improve health outcomes. Staying abreast of ACO development could be beneficial to healthcare organizations struggling to manage costs. Additionally, the emerging needs of ACO participants will provide clues about potential CME topics and referral opportunities.

FHIR

There is growing enthusiasm in the healthcare IT community for fast health interoperability resources, commonly referred to as FHIR (and pronounced “fire”). In 2014, FHIR was named one of the top ten tech trends in healthcare. The excitement surrounding FHIR has to do with a specification that promises to ease health IT bottlenecks and offer more granular data access. This would enable healthcare organizations to deliver web services more in line with high-tech companies like Google and Facebook, making the exchange of healthcare information faster and more efficient.

In everyday terms, this means Physicians will be able to access very specific patient information quickly and healthcare organizations will be able to engage patients through new and innovative apps, which will look and feel like the Apple app store.

Conclusion

As the healthcare ecosystem continues to evolve and consolidate, hospitals and health systems will need to continue making strategic adjustments to their marketing strategies. Understandably, many of the changes in hospital and health system marketing efforts have focused on engaging patients — to the effect that the marketplace is now flooded with hospital and health system advertisements that are confusing to potential patients. So how can healthcare organizations differentiate themselves?

As this whitepaper has shown, one of the ways is by allocating more time and resources to Physician-related activities such as CME programs and referrals. What is known about the influence on Physicians over patient decisions, and the revenue potential of Physician referrals and CME programs, makes the argument for Physician marketing both compelling and credible.

Finally, the resources outlined in this whitepaper — healthcare provider databases, email services, analytics services and CRM data — share similarities with the marketing tools successfully used in other industries. Leveraging solutions from a data expert like Healthcare Data Solutions allows hospitals and health systems to increase their marketing results and revenues quickly and cost-effectively.

To learn which Healthcare Data Solutions products or services can help your organization increase referral and CME revenues, call us at 1-877-397-4114 or visit www.HealthcareDataSolutions.com.