Building a Referral Base for Therapeutic Footwear



10 Maple Street, Suite 301 Middleton, MA 01949 office@aappm.org

#1 - Building a Referral Base for Therapeutic Footwear

Adding a diabetic footwear program to your practice can be one of the most clinically significant and financially rewarding strategies available to today's podiatrist. Over 80% of podiatrists currently are not dispensing these critically important products to their patient populations. In addition to the obvious benefits of providing these services, a properly facilitated and administered communications program will result in a significant source of new referral sources; both professional and patient.

Consider these facts:

- Over 50% of non-traumatic amputations are performed on people with diabetes
- Over half of these could have been prevented with timely, conservative intervention (footwear and protective inserts)
- Diabetic population rising at 30% per decade
- Only 3% of eligible patients receive the Medicare benefit

The fact that only 3% of eligible patients are receiving this important benefit is primarily due to a lack of knowledge; both in the patient and physician populations. This represents an enormous opportunity for podiatrists. By adopting an information-based strategy you can easily go into your community and let all interested parties know about the importance of foot health in the diabetic population and about the Medicare's desire to protect these "at risk" patients.

Many practitioners adopt a proactive strategy regarding physician referrals. An informative letter outlining the danger that diabetic patients face and the role of the Therapeutic Footwear Program in mitigating these risks, should be sent to the entire diabetic medical team in your community. A necessary step in supplying these patients with their footwear is a signed certifying statement by their physician. Properly handled, this too can become another element in your information campaign and provides you with the opportunity to establish a working relationship with new referral sources.

Proper signage and patient information about this service in your office will result in new patient referrals to your practice. Every one of your patients knows, or is related to, someone with diabetes. By letting them know that they me be eligible for this important benefit, your existing patients are turned into community advocates for your practice. Make certain that you have informational materials available to your patients to take and distribute within their social circles.

#2 P.R.O.M.O.T.E. Y.O.U.R. P.R.A.C.T.I.C.E.

P = Patients

R = Radio

O = Other Podiatrists

M = Magazines/Newspapers/Newsletters

O = Organizations

T = Trainers

E = Educational Institutions

Y = Yellow Pages Ad

O = Outside Sign

U = Unique Events

R = Rep's from Pharmaceutical Companies

P = Physicians

R = Races

A = All Shoe Stores

C = Celebrate Foot Health Month

T = The Drug Stores

I = Industry

C = Clinics/Hospitals

E = Employees

P = Patients

#1 source every year in practice

Send thank you note and write in chart

Ask – especially on discharge, sx begets sx

Magnets "send a friend" - give or send

Business cards in room

Keep track in new patient book and reward (end of year – xmas card, lottery ticket, restaurant) 20th year reunion

R = Radio

Talk shows (volunteer)

Tape psa's

Tv show – local

O = Other podiatrists

Speciality – triples, arthroscopy, kids, wound care, diabetes

Be on good terms – testify

Volunteer state association – get involved PPAC, etc.

M = Magazines/newspapers/newsletters

Press releases special events – 20th reunion, selling shoes, etc. (newspapers have e-mail address) paid ad that looks like an article

Special health issue

Practice brochure – on family doc's counter/ mail to them

Newsletters – ACFAS has newsletter, e-mail to patients, Microsoft Publisher

O = Organizations

Kiwanis, rotary club, sororities, mother's club (remember most appts made by females)

Join church, clubs (lions, masons, university women, etc)

Become a volunteer (scouts, etc)

T = Trainers

Local teams – college and h.s. Basketball coaches

Tape athletes

Become team doctor

E = Educational institutions

Young children need to know about podiatrists – give aways (shoe laces, foot pins, foot candy), take your bones, discuss bee stings, warts, athletes foot, slide shows available

Health care forums and career days at local schools and colleges

Y = Yellow pages ad

Don't mention surgery

Mention insurance plans, hours, location,

Handicap parking/accessible, other language

Consider colored ink or bold black print in white pages

Advertise in surrounding areas

Podiatrists vs. Physicians

O = Outside sign

Put your logo on it

Bright colors

Easy to read

Print large enough to see from street

Take out surgeon

Define podiatrist as foot specialist or foot & ankle specialist

U = Unique events

County fairs – buy baked goods, booth

Senior health fairs

Diabetes month - screening

Council on older adults talk

Senior citizens center talk

R = Representatives from pharmaceutical companies

Novartis paid ad about me and lamisil

Sponsored talk to other podiatrists

P = Physicians

Send letters for referrals (even HMOs)

Use same format, short, to the point

Put in hospital mail box so they read

Have your transcriptionist draft them

Go to social events (xmas party, dinner before staff meetings and be amiable)

Host an open house

Cheesecakes at thanksgiving

Book to new family docs and internists

Refer to them (h&p's from hospital)

Send your new associate with lunch to their offices to meet them and their staff

Or have other staffs visit you (give magnets and practice brochures)

R = Races and walk-a-thons

Volunteer for first aid

Pumpkin run/little brown jug race

A = All shoe stores

Walking co takes business cards and posts them

Find out what styles and brands of shoes are available

Coupons to your patients

Maps to stores

Discuss orthotic fitting

Have free screening and fitting in shoe store (they advertise)

Offer business cards and/or magnet

C = Celebrate foot health month

Get materials from state association or APMA

Offer free screening in your office

Some forms for your use

Give out brochures with your gold labels

Dr. Scholl's offers free brochures and wall mounted display board

T = The drug stores

Know your pharmacists and respect them

Give business cards

Know what foot health products available where

Support hose, braces, crutches, etc.

Know your compounding pharmacist (Wydase, Celeston Soluspan, Canthrone)

Medicine shoppe had health screening in tent outside

I = Industry

Screening at your largest employers (Honda)

Meet company doc's

Ask if you can put literature in their breakroom or on employee bulletin board or company newsletter (especially oriented on safety and preventive medicine)

Learn manufacturers of steel-toed shoes

Offer free screening

C = Clinics/hospitals

Offer to be on their speaker's bureau

Offer to speak at diabetes support group/fibromyalgia/ etc. (foot reflexology)

Large exhibit board by elevators (feature all staff podiatrists)

Hospital advertises new docs with picture

Referral hot line

Attend staff meetings

Volunteer on committees

Build your reputation

E = Employees

Get them business cards

Jackets, denim shirts, polo shirts

Name badges

Pictures and names in waiting room

Wear orthotics, anywear clogs

Offer revenue bonus to promote team spirit with common goal

Other ideas

Jails and prisons (especially for youth)

Job fairs (especially for high school)k

Let someone "shadow" you

Brochures in office

#3- Nail Salons are a Land of Opportunity

Nail salons provide an excellent opportunity to build a referral base. There are numerous nail salons in any given area providing pedicures. They see an incredible amount of pathology on a daily basis and are frequently asked foot related questions. Educating the pedicurist on the most common foot conditions would likely lead to numerous referrals.

Partnering with a pharmaceutical representative with a products that treats nail fungus would help to reduce your out of pocket expense for this program. Start with having referral pads made with your name, contact information ten most common foot conditions listed with a check off box and "referred by..." on the bottom for the pedicurist to put their name. We have found that a 8 ½" x 5 ½" pad of fifty is the simplest for the pedicurist to keep in their drawer.

#4 - "Lunch and Learn"

A valuable tool is the "Lunch and Learn" program presented to the staff of physician's office in your community. Have your employee with the most knowledge of podiatry and most effective at communicating contact the office manager at the physician office targeted to visit. Your assistant will offer to bring in lunch including a first class dessert and make a short presentation followed by questions and answers about conditions we treat. A packet is presented in a professional done folder including a laminated list of insurance plans accepted with physician ID numbers, pad of referral forms discussed above, brochures on conditions we treat one on the training of a podiatrist (available from the APMA and the ACFAS) a comprehensive booklet on foot injuries and surgery (printed by Krames Communication and available through Medical Arts Press), rolodex cards with foot and ankle care on the tab and a practice brochure.

The podiatrist can also attend but medical assistants are often more comfortable and related better to your staff. The physicians can also be invited and often attend and are attentive. Keep the lunch to 30 to 45 minutes and be sure your assistant has their own card to leave with the staff to serve as a point of contact in your office. Consider giving that particular staff person the title of "Physician Liaison". A handwritten card should be written to the office manager thanking them for the opportunity to meet with their staff.

When a new physician of any specialty including chiropractors and physical therapists open or join a practice in your area send an introduction letter with one of your cards. In the letter include a welcome to the community, indicate that a brief report will be sent to them when one of their patients consult you, relate that a complete history and physical is taken at the initial visit and they will be contacted if medical complaints have developed and you welcome an opportunity to meet with them in their office or for lunch. A referral source that is often over looked are chiropractors and physical therapists. There is a significant opportunity for referral especially for biomechanical abnormalities requiring orthotic devices including leg length discrepancies. They welcome an opportunity for you to give an in-service at their office including the staff and offer to bring lunch. Focus on biomechanics and its relationship to the entire lower extremity and spine as well as its relationship to the development of the most common foot and ankle complaints and deformities we treat.

#5 - Reaching out for Opportunities with Local Physicians

Once a year survey referring physicians to solicit their comments and concerns as well as their staffs. This shows that you recognize the importance of your relationship with them and respect their input. If there is an internal medicine or family practice residency program at your local hospital offer to give a lecture on podiatric medicine and surgery.

Offer rotations in your office for the medical residents to further educate them to the role of a podiatrist in the medical community. Grand Rounds is an opportunity to address an audience of physicians of all specialties at your hospital. Send a letter to physicians in your area offering an assortment of pamphlets on podiatric conditions to help educate them and their staff with an offer to provide copies for to distribute to their patients. The brochure should have a label attached with your name, address, phone number and web site. Enclose a form for them to check off which ones they would like as well as the quantity. Provide your fax number and a self-addressed return envelope. A web site is an excellent tool for physicians, their staff and referred patients to learn about your practice and conditions we treat. Encourage referring physicians to give the web site to the patients referred to your office. A pad of "podiatric referral forms" should be printed and distributed to local physicians including:

- your name, address, phone and fax number and web site in larger letters
- · referred patient's name
- referring doctor

- chief complaint (list ten most common podiatric condition with a line for "other)
- · map to your office
- a line for referring physician's office to add a referral number or box to check off if a written referral is needed.

#6 Marketing your practice base

Have you ever received a post card in the mail from your dentist letting you know about the latest dental techniques being used for TMJ? There is a very good reason that you received this postcard in the first place. It gets patients into your dentists office and it is one of the most effective and inexpensive ways to do so!

Why don't podiatrists use this method of marketing more frequently? Statistics show that your past patient base is one of your best sources to increase volume in your office. Your old patients know you and trust you. They do not represent a "cold market". In fact, they are your finest form of advertisement and are pleased to hear from you about your services. Here are a few ways to engage in the process of marketing your practice base:

- Write a letter (usually in October) informing patients that they should make an appointment to see you before January 1 to avoid paying a deductible.
- Pick a year (i.e. 1999) and call those patients who have not been in your office for an
 extended period to see how their feet are doing. You will be surprised the number of people
 that will make an appointment
- Send out a newsletter from the office.
- New technique for heel pain relief...send a postcard with a brief description of the new treatment method to all patients with a diagnosis of plantar fasciitis.

The list is endless. Get creative and have your staff do the follow up calls to all letters sent. Your patients will appreciate you showing that you care enough to call and check on their progress.

#7 Consider "unconventional" referral sources

We all think of primary care physicians when it comes to referral sources. These providers will fill our offices with patients once a relationship is developed. That same relationship can be developed with other healthcare providers who will keep you busy as well. By thinking beyond family practitioners and internists your reception room will overflow with patients eager to see you from new, credible sources.

Chiropractors are a great way to start. The average chiropractor has a high volume practice. They treat a whole host of musculoskeletal complaints, which include foot and ankle problems. They recommend orthotics but may send the patients out of their office to get them. Pay a lunchtime visit to your local chiropractors offices and set up a time to bring lunch and give the staff an in-service about podiatric conditions. Cover all that you do with a focus on musculoskeletal conditions and orthotics. There are usually twice as many chiropractors as podiatrists in most cities and towns and they are open and easy to talk to! Find out what they do because their work is fascinating, effective and sometimes even misunderstood.

There are a whole host of other respected professionals that will send you patients if you just introduce yourself and let them know what you do. These include diabetes educators, school nurses, high school and college athletic trainers and massage therapists. Dermatologists will often not do chemical matrixectomies and will defer treatment to a podiatrist.

The universe of referral sources is almost endless and after a couple of months of consistent effort you will be buying more chairs for your reception room!

#8 How to be Your Own Best Referral Source

When I was asked to write about my best referral source for patients, I thought I had nothing creative to add to this subject. But perhaps the answer isn't obvious to every podiatrist. I don't think it's a coincidence that when I attended my 20th (ouch!) podiatry reunion, that the men and women whom I had respected the most and were the most friendly were succeeding in practice. They had found true enjoyment in this profession and it had provided more than adequate income for their families and lifestyles.

In contrast, it was enlightening to observe that those students who were not particularly kind or nice had either lost their license to practice, had left the profession entirely, or were struggling financially. One student during our freshman year was caught cheating on a test and he later lost his license by practicing outside the scope of podiatry. Another student whose gold chains were only out shined by his arrogance has the distinction of acquiring the most lawsuits in the nation. He has since retired early with an integrity that is surely bankrupt.

If you want to attract more patients to your practice, then start considering what you can give to your family, your community, your place of worship, your staff, and your patients. You shouldn't do this in order to gain more wealth or more surgery patients, but out of generosity of spirit.

If you have less experience in giving service, then it might be a bit more difficult to begin. Start small...sit in your waiting room and look around. What could you do to make your patients and their families more comfortable? Are your chairs padded and easy to rise from? Is the music pleasant? Is the reading material current and interesting?

Then sit in your treatment room chair and look around. Think about what your patients see, hear, and feel. Are there shiny sharp instruments lying on the counter creating anxiety? Is your burr in a prominent location so the patient can imagine a dentist grinding their teeth? Do you draw up injections in front of the patient so they become fearful even before the needle stick?

Spend time listening to what your staff members are telling your patients – both in person and on the telephone. Recently, a senior citizen was scheduled for knee surgery at the hospital and was told she must schedule her own pre-operative testing. Not only was this confusing to her, but many of our patients would not be capable of doing this. More importantly, it was not providing good service to this patient.

Long before legislation made it mandatory for a doctor's office to bill Medicare for elderly patients, our office had offered this service. We had learned how confusing and difficult it was for many people to send in their own claims, especially to the secondary insurance company.

Once you've looked closely at developing a "patient-oriented" practice, then you can look outside the doors of your office. Do you volunteer for any charitable organizations? It isn't enough to just send off a check once in a while that takes 5 minutes to write and then deduct it from your taxes. It must be something that requires your valuable time.

One example would be to get involved in scouting programs. For six years, I was a Girl Scout leader for my daughters' troop. Although these activities consumed a lot of time, they created many good memories for us. It also taught my children that service is an important aspect of living in this world. We cleaned up parks, worked at the recycling center, collected canned goods for our local food pantry, played with handicapped children at a local preschool, and sang Christmas carols at nursing homes to name just some of our service projects over the years.

It is my belief that there are only two kinds of people in this world – those that are actively working to make our planet a better place for all human beings and those that are not. You might say, "Hey, I'm not responsible for the world being in this sorry state." But if you are sitting idly by and allowing the world to "take care of itself", then you are in the second category. As

citizens of this planet Earth, we are all equally responsible to create a more peaceful and positive life for everyone.

There are numerous podiatrists who give freely of their valuable time to help improve our profession through such organizations as the APMA, state associations, ACFAS and through publications such as Podiatry Management and Podiatry Today. Others offer their medical expertise such as the volunteers at Ground Zero, the Baja project, and the many trips to underprivileged countries. These podiatrists are actively making this world a better place for all and they deserve our sincere thanks.

I feel certain that if you meet some of these individuals, you will find an interesting pattern. Each of these doctors is likely to have a full schedule of patients and more wealth than they desire. The generous nature of these men and women simply attract people to their practices.

While speaking to students at OCPM, I encouraged them to refrain from asking themselves when they face a new patient – "How many x-rays, surgeries or other services can I provide to help pay off my student loans?"; but instead, to ask themselves - "How can I make this patient so satisfied with my care that they will tell all their friends and relatives?".

If you concentrate on money, you will likely never earn enough. But if you focus on the people you treat and not on what insurance company they have, you will find yourself with a steady, growing income that will never falter – even when Medicare decides to drop reimbursement 5.4%.

There is one final aspect of becoming a "giver" to this world. You will have attained respect, love, and admiration from your family, your community, and your staff. But most important, you'll look in the mirror at the end of your day and truly feel satisfied with the person you have become.

Alison Dewaters, PMAC is a podiatric medical assistant for over eight years and a third year student at Temple University School of Podiatric Medicine. Alison is on the Board of Trustees of the American Podiatric Medical Students' Association and student liaison to the American Academy of Podiatric Practice Management. She is nationally certified in podiatric medical assisting (PMAC). Alison can be contacted at adewaters @aappm.com

Jane Graebner, DPM practices in Delaware, Ohio and Board Certified by American Board of Podiatric Surgery. She is a past member of the Ohio Podiatric Medical Association (OPMA) Board of Trustees, a Fellow of the American Academy of Podiatric Practice Management and course director of the OPMA Annual Assistant's Meeting. She can be reached at graebner@midohio.net.

Jason Kraus is Vice President for Langer, Inc. He is currently Chairman of the Corporate Advisory Board of the American Podiatric Medical Student Association and a board member of American Academy of Podiatric Practice Management. He holds a Bachelors of Science degree in Business Economics and can be contacted at jkraus@aappm.com.

Bill McCann, DPM is a Diplomate, American Board of Podiatric Surgery, Fellow, American Academy of Podiatric Practice Management. and President-elect and newsletter editor for the American Academy of Podiatric Practice Management. He lectures throughout the country, writes on topics pertinent to practice management. He is in private practice in Concord, NH and can be reached at wmccann@aappm.com.

Hal Ornstein, DPM is a Diplomate, American Board of Podiatric Surgery and Fellow, American College of Foot and Ankle Surgeons. Dr. Ornstein is President of the American Academy of Podiatric Practice Management, Consulting Editor for Podiatry Management Magazine partner of SOS (Secrets of Success) Healthcare Management Solutions, LLC. He is a lecturer and author on topics pertinent to practice management and patient satisfaction and physician manager of Affiliated Foot and Ankle Center, LLP with his main office in Howell, NJ. Dr. Ornstein can be contacted at hornstein@aappm.org.