

How a Premium Practice Makes Use of the Internet

by Conni Bergmann Koury, Executive Editor

If you are a premium practice, your Web site should reflect that.

Every day in the United States, 175 million people use the Internet. According to Pew Research, 84% of those Internet users are searching for information about health care services, more than half are looking for information on behalf of another, and 44% have reviewed someone's commentary or experiences in their search process.¹ Of course a superior practice that is well known in the community still relies on word of mouth for 80% to 90% of their business, but today, according to David Evans, PhD, MBA, word of mouth is supported by the Internet. A premium practice should be properly positioned online to capture patients who are looking for the services it provides.

"If a prospective patient hears about a doctor from a friend, the first thing he or she is going to do is look that doctor up on the Internet," he said. "If that person cannot find the doctor online—that is a big problem." Dr. Evans is the CEO of Ceatus Media Group LLC (San Diego, CA), which specializes in designing custom medical Websites and providing search engine optimization services. He has a PhD in ocular physiology and has been involved in Internet marketing for ophthalmology since 1996.

"Although a practice's ranking on Google is totally unrelated to the quality of service the doctor provides, consumers perceive a connection between being easily found on the Internet and credibility," he explained.



"A premium practice must have premium online visibility."

THE LOOK, FEEL, AND CONTENT OF THE WEBSITE

The Web site of a premium practice should contain content that is highly educational and provides an effective avenue for converting patients with a prominent call to action. "The practice must make it easy for prospective patients to call. For example, a common mistake is putting the practice's contact information and phone number in only one place (i.e. on the contact page), when it should be in several."

The Web site's marketing message should be clean and clear, Dr. Evans said. "What is vision correction really about? Independence from glasses and contact lenses means an enhanced lifestyle. Enhanced vision is about being able to ski without glasses and play tennis at night." He said that often practices decide to feature the doctor or its technology on the Web site, but this information does not resonate as deeply with patients. Patients want to know how does this service effect me. It is important that the doctor is Harvard educated, but that should not be the focus."

Web sites should be easy to navigate. Online scheduling and the option of filling out paperwork before an office visit might help enhance patient flow in the practice, however, those things are not a priority for potential patients. "Most often, patients would prefer to call the practice and have their questions answered quickly by a highly knowledgeable person. It is more intimate and it is more effective, particularly for an initial LASIK consultation, for example," he said. For more on the importance of the telephone in the premium practice, see the March issue of PPT.

What other factors should a premium practice consider when designing their Web site? Dr. Evans said the trend is toward a wider look to be compatible with today's large, wide-screen monitors. Another thing consumers find extremely valuable, as noted by the statistics from Pew Research mentioned earlier, are testimonials. "Unfortunately, Web site designers tend to bury patient testimonials. This is a big mistake." Web sites should be structured for prospective patients as well as others who may be doing research on their behalf.

SEARCH ENGINE OPTIMIZATION

Search engine optimization is very specialized niche unto itself, Dr. Evans explained. "Theoretically it is a simple thing: the Web site must be made compatible with a search engine's algorithm so that the practice's Web site appears highly ranked in the search results."

Google accounts for about 70% of the world search market, he said.

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[?comScore Jan 2010] Search engines use unique and highly confidential algorithms to rank Web sites. Something called “crawlers” or “spiders” review Web sites, score the websites based on a number of variables and then store the websites in a database. When a user searches for a keyword (eg “LASIK”), the search engine database runs the keyword search through its algorithm, evaluates all of the variables assigned to the website and creates a list of web sites in the search results based on the algorithm.

A select number of results that come up as a result of this type of search are referred to as organic. Six out of seven Internet users click on these organic listings,[Jupiter] which are perceived by consumers as highly credible. These searches drive substantial traffic to Web sites and have long-term visibility.

OPTIMIZING BY SEARCH TERMS

In order to implement an effective optimization strategy, the practice must establish the key word focus of the strategy. First, the practice should be optimized by its name and appear in the search results in response to a search for the doctor name or practice name. This type of optimization is very important to support word-of-mouth referrals. Second, for consumers who are not familiar with the practice, but are in the same area, the site should appear in the search results for generic terms (eg, LASIK, new-technology IOLs) that include location. A search engine optimization strategy that Dr. Evans recommends is for the practice to focus on more specific localized search terms, ie,

“When a consumer searches a generic term, such as “LASIK Surgery,” numerous large sites will appear in the results, such as ASCRS, Wikipedia, FDA, etc. It is difficult for a practice to compete with the credibility of these large sites,” Dr. Evans said. “Google’s algorithm might rank one or two local doctors on the first page for a generic search term, however, it is extremely difficult to obtain this result and is not a good idea to pursue this type of ranking as a primary strategy.”

Practices have the option of buying into one of the large eye care information portals, such as www.allaboutvision.com or www.lasiksurgerynews.com. “Large portals rank for generic search terms,” he said, and 80% of people search this way. “It is a common misperception that a potential patient would search “LASIK Philadelphia,” for example, as an initial search. That is not how it works. We know that patients take 6 to 9 months to make a decision about refractive surgery, so they want to learn about the procedure first. The first searches and majority of the searches are for the generic search terms, which allow patients to learn about the procedure.”



Because it is so difficult for a practice’s site to rank when a generic search term is used, Dr. Evans’ recommend that his clients use directories for that type of visibility. “The practice’s Web site should focus its visibility strategy for the local search term.”

Note that search engine optimization is complicated, and some companies that provide the service might not be experts. “It is possible for a Web site to be damaged if the process is done incorrectly. Google can penalize a Web site if it believes that there is undue manipulation taking place with search engine optimization, such as duplicate content about the practice on multiple websites.”

PAER-PER-CLICK ADVERTISING

“Pay-per-click” ads also appear when a generic search term is used. “That is the other side of search engine optimization,” Dr. Evans said. “If the practice can’t appear on Google for an organic search, then purchasing pay-per-click advertisements can provide additional visibility.” In any case, a pay-per-click ad strategy (if it is in the budget) should be an adjunct and not the primary focus of the practice’s online strategy.

Pay-per-click advertising is very easy to implement, can drive substantial traffic, and is excellent for brand building, Dr. Evans said. There are several cons associated with pay-per-click advertising, though. Click fraud is common, the practice has to pay for clicks that are not legitimate. It can get expensive, and there is no long-term visibility; once advertising is

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stopped the website no longer appears in the search results. “The biggest con, however, is that only one in seven users click on pay-per-click ads,” he said. “These ads have limited credibility in the eyes of consumers.”³

BLOGGING AND SOCIAL MEDIA

Blogging by physicians is a very important and powerful tool, Dr. Evans said. “Although there is a lot of buzz about other social media, in our experience, it is not that useful for driving quality traffic to physicians’ Websites. With Facebook for example, statistics show visitors are on a given site for 20 seconds and Twitter really has had no impact.” Practices should not ignore social media, but its value should be kept in perspective.

“Blogging, however, and answering patients’ questions online empowers them and also builds trust with the practice.” Remember, though, if the practice is going to offer an online forum to respond to patient inquiries, it needs to be operational around the clock and on weekends. “People expect to receive prompt responses, so the parameters of the online exchange have to be very clear.

Designated members of a practice’s staff may participate in such an online forum, as long as they are educated and can provide accurate and clear information,” Dr. Evans said.

REPUTATION MANAGEMENT

When negative comments about the doctor or the practice appear online—some well-known sites are www.lasikfraud.com, www.doctorscorecard.com or www.ripoffreport.com—what can be done? “There is a lot of confusion over this,” Dr Evans said. “Reputation management is the opposite of search engine optimization, in a way. Instead of trying to get a practice ranked higher on the search results, the goal is to get the negative comments to appear further down on the search results—preferable off the first page of Google.”

This is a tough proposition, he said, as it entails having to move seven or eight sites ahead of the negative comments in the search results. “We suggest the practice create new sites using domain names that use the doctor’s name. These Web sites can potentially become rank higher than the one with the negative comment. It’s a very difficult thing to accomplish, and many providers are very interested in this. It is distressing to have negative comments, but it is going to happen.”

Certainly if the negative comments are clearly false, then there are legal options. In general, however, the comments are protected by free speech.

“We recommend that practices do not engage or recognize such comments, as that can exacerbate the situation.”

To manage the reputation of the practice online, Dr. Evans suggests setting up a monitoring system by registering for Google Alerts. This lets a practice know when its name is mentioned in the Google index. Other strategies include publishing news releases with positive comments, use social media and blogs to optimize the doctor and the practice’s name, and encourage patients to write positive reviews about the practice using sites such as Google Local, Yelp, Vitals, and Healthgrades.

The Internet is very important component of marketing for premium practices, Dr. Evans said. The goal should be an excellent practice Web site that is easy for consumers to find.

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1. PEW
2. Google
3. Jupiter Research