IMPLANT PRACTICE

THOMMEN Medical



SUCCESS REPORT

from Thommen Medical and Levin Group



Welcome to Issue #5 of **The Implant Practice Success Report**, a monthly newsletter on implant practice success. Levin Group and Thommen Medical are very pleased to provide business education to implant doctors and their teams. Each month *The Implant Practice Success Report* will feature leading-edge education for managing, marketing, and maintaining a robust and successful implant practice.

In this issue we focus on Scheduling and Marketing "Quantity."





The 7-Day Scheduling Rule

By Roger P. Levin, DDS

The last few years prior to COVID-19 were excellent economic years. This is what all practices desire; however, in good times businesses tend to perform well and gradually start to believe it was their knowledge and expertise that created the situation. While this may be true to some degree, a good economy makes all businesses look and perform better.

The same is true for dental implants. They have been growing steadily for the last 15 years. Even the Great Recession (2008-2009) did not push implants in the United States down into negative territory. There was a drop from approximately 16% growth in dental implants in 2007 to approximately 3% in 2008. They stayed low but gradually increased over the next few years. We don't know the effect the pandemic has had on dental implants, but we are anticipating a rise in implant placement as we move toward a vaccine and hopefully a more stable future. However, we don't necessarily believe that it will come back to the pre-pandemic levels as the economy must go through a recovery after the rollout of a vaccine.

Given all of this, it will be important to schedule patient implant consults as soon as possible. You must act swiftly because at the time of a referral or patient inquiry, patients are motivated and perhaps even excited. However, that motivation and excitement begins to diminish the longer it takes the practice to schedule the consult.

Over the years, Levin Group has developed the 7-day scheduling rule which simply dictates you must get an implant consult scheduled within seven days of a patient or referring practice call. The Levin Group Data Center has found that scheduling patients within seven days results in a higher level of implant case acceptance.

Now that we have moved through the pent-up demand phase, the underlying fundamentals and management systems of each specialty practice will become more apparent. To ensure the best opportunities for ongoing success, design a scheduling system that allows for the average number of weekly consults to be scheduled within seven days of a patient call. It also makes sense to promote this to referring doctors and let them know that your practice will strive to see patients within seven days. Explain it from a customer service perspective. Practices that can schedule patients quickly are seen as practices that are friendlier and care about customer service.

This may seem like a small change, but it could have a significant impact on case acceptance in an uncertain and possibly challenging economic time.



The Quantity Factor

By Roger P. Levin, DDS

Referral marketing is not well understood. It's not taught in business schools and there are no textbooks on the subject. In fact, there's very little information available when it comes to understanding the science of referral marketing and achieving predictable results. I've often wondered why business schools don't teach referral marketing since it is such an essential part of the success of so many businesses. The only answer I've been able to conjure up is that referral marketing is more of a personal activity and hard to quantify into a course or textbook.

One of our first findings when we launched referral marketing consulting many years ago was that the quality of marketing was important, but it wasn't the whole story. Practices and doctors naturally wanted to provide quality strategies to build strong relationships with referring doctors and it seemed to work—35 years ago. However, like many research studies the result was not actually tied to the process.

What this means is that back then, it seemed as if a few quality strategies were all that was needed to generate more referrals. However, this was wrong. It was not the few quality strategies that created the referrals, It was the fact that there was less competition in general. Because practices had to compete less, any attention to referrers would increase referrals for a specialty practice.

Fast forward from 35 years ago to today. Competition has increased. The internet has become a primary information source, reviews appear online, and referring doctors make decisions differently. The result is that the quality of your practice alone will not secure a strong stream of referrals.

So, what does work? A combination of both the right quality and **quantity** of strategies, which is the main point of this article. The quantity of strategies has been the basis we have used for many years to increase referrals and it works

consistently. When practices understand that you need many touch points to build relationships with referring doctors and influence them to refer to a specific specialty practice, then referrals increase.

Consider the following. Some practices have two or three high-quality strategies that they've put in place. For many years, the referrals were strong. However, in our opinion, they were always in danger. Other practices follow the protocol of using a recommended 15 strategies functioning together at all times focused on referring doctors. These practices can and will generate a strong stream of referrals and continue to maintain those referral sources and referrals over an extended period. Why? Because the larger quantity of strategies is the "X factor" that truly creates and maintains the referral flow.

We discovered this concept of increasing the quantity of strategies in 1985. Since that time, we've had the opportunity to study the results of thousands of specialty practices and the vast majority that implemented the right number of strategies were able to increase referrals. This isn't something that is well understood or taught in most marketing educational programs, but it does work, and work extremely well.

The main point here is that most specialty practices don't have enough strategies. There are big, medium and small strategies and they all need to function together as part of a well-planned, ongoing referral marketing program. In fact, when the strategies are put in place, the quantity is often more important than the actual strategies selected.

As I say often in seminars, "If they're not hearing from you, they're not thinking of you."





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Roger P. Levin, DDS is the CEO and Founder of Levin Group, a leading practice management consulting firm that has worked with over 30,000 practices to increase production. A recognized expert on dental practice management and marketing, he has written 67 books and over 4,000 articles and regularly presents seminars in the U.S. and around the world.

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