

HCMS
Harris County Medical Society

Marketing 101:

HCMS Resources to Develop Your Patient Base

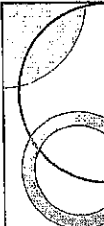


Marketing 101:
HCMS Resources to Develop Your Patient Base

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VP, Member Services - HCMS
President - Medserv

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Marketing

“Effective marketing is really quite simple: Identify your destination (**goals**). Determine how best to get there (**strategy**). Get started (**tactics**). Measure your progress (**reporting and analysis**). Make course corrections as needed (**continuous improvement**).”

Mac McIntosh – 2004

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Effective Marketing

Effective marketing requires a **plan**:

1. Identify your destination (**goals**)
2. Determine how best to get there (**strategy**)
3. Get started (**tactics**)
4. Measure your progress (**reporting and analysis**)
5. Make course corrections as needed (**continuous improvement**)

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1. Identify Your Destination (goals)

Define measurable goals that are consistent with the practice's payer mix strategy and practice expansion objectives.

Examples:

- Increase the number of new patients by x%;
- Increase the number of referring physicians by x%
- Shift payer mix by 10% from payer A to payer B


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2. Determine how best to get there (strategy)

- Describe what makes the practice unique – these are your strengths (i.e. special training, special accomplishments by physicians, specialization in specific procedures, etc.)
- Describe the services being offered (i.e. non-traditional office hours, concierge services, ancillary services etc.)
- Describe how you will position your practice – based on the above. Develop your brand (identity).
- Determine your marketing methods (i.e. will referral base be developed through physicians, hospitals, general marketing to the community, Internet, all of the above.)

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3. Get started (tactics)

Determine the steps to be taken to implement strategy.


3a) Identify marketing venues:

- A. Physicians and other professional medical sources
- B. General public/Professional Associations

3b) Identify the tools, especially technology, available to market effectively and efficiently.

3c) Determine a budget for each tactic.

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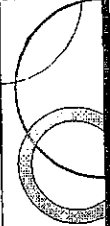


3. Get started (tactics)

3a) Identify marketing venues:

- A. Physicians and other professional medical sources
 - A1) Define your referral base
 - A2) Identify and select your advertising venues
- B. General public/Professional Associations
 - B1) Define your preferred patient base
 - B2) Identify and select your advertising venues

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3a) Identify marketing venues:

A. Marketing through physicians and other professional medical sources

A1) Define Your Referral Base:

- ✓ List all specialties that could be a source of referrals. HCMS Pictorial Roster: Codes for self designated practice specialties.
- ✓ List all zip codes from which referrals could originate. HCMS Pictorial Roster: Map of Harris County with zip codes.

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A. Marketing through physicians and other professional medical sources Cont.

A2) Identify and Select Advertising Venues

Sample venues include:

1. *Your county and state medical societies - HCMS/TMA*
 - a. Physician databases
 - b. Practice visibility resources
 - c. Networking opportunities

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A. Marketing through physicians and other professional medical sources Cont.


a. Physician Databases

1. **HCMS Pictorial Roster** – The primary visibility tool for practicing physicians in Harris County. Used by community physicians for patient referral. **Cost:** \$0

Applications:

- Presence in the roster – recent survey confirms that the number one use of the roster is to look up physicians to confirm practice address and contact information. **Cost:** \$0
- List of self designated specialties – use to identify new referring specialties.
- Listing by Specialty – use to refer patients by geographic location and zip code.
- Includes a zip code map to select parameters for marketing efforts.
- Medical practice listings – Expand on the physician's biographical listing in the roster and showcase the practice(locations, procedures, website address, fax number, etc). **Cost:** \$215 Includes electronic listing in the Online Member Directory for all HCMS members in the practice.

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A. Marketing through physicians and other professional medical sources Cont.

2. **HCMS Online Membership Directory**- A HCMS member database in the Members Only section of the website, gives members searchable contact and specialty information on HCMS physicians. **Cost:** \$0 for Physician Listing; \$215.

Features:

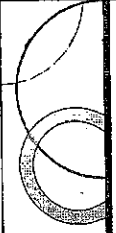
- Search by name, specialty, city, gender, geography
- Offers e-mail addresses, and an electronic practice listing

3. **TMA Find A Physician**– A TMA member database on the TMA website (www.texmed.org) gives members searchable contact and specialty information on 45,000 Texas physicians. **Cost:** \$0

Features:

- Search by name, specialty, city, county
- Only electronic database that can be used by staff and available to the public

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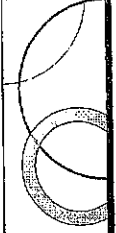
A. Marketing through physicians and other professional medical sources Cont.

4. **TMA Mobile Application**– A TMA smartphone application gives members searchable contact and specialty information on 45,000 Texas physicians, plus TMA news, events, and alerts – with live updates. **Cost:** \$0

Features:

- Search by name, specialty, zip code
- Information includes fax and website
- Includes map to office location
- Customizing features include:
 - ✓ Create list of favorites to easily access physicians and/or a specialty group
 - ✓ Update TMA/CMS profile and preferences (billing/mailling address changes)

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A. Marketing through physicians and other professional medical sources Cont.

5. **DocBookMD**– A HCMS member database and HIPAA compliant communication tool for physicians to discuss shared patients. It is particularly suitable for communication within a practice and hospital setting. **Cost:** \$0

Features:

- Search by name and specialty
- Information includes fax and website
- Includes map to office location
- Can attach images
- Customizing features include:
 - ✓ Create list of favorites to easily access physicians and/or a specialty group

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A. Marketing through physicians and other professional medical sources Cont.

6. **HCMS Physician Referral Program** – a modest referral program with comparable cost used to direct the general public that calls HCMS directly. **Cost:** \$35 per year

b. Practice Visibility

1. **100% Membership Practice Recognition** – Recognition of practice on the HCMS website with a link to the practice website, Physician Newsletter, HCMS Pictorial Roster. Includes an option for a streamlined single billing process. **Cost:** \$0
2. **DocList program** – can accommodate targeted referring physicians by specialty and zip code. **Cost:** \$50-\$200

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A. Marketing through physicians and other professional medical sources Cont.

c. Networking Opportunities

1. **Six Branches (Central, SE, SW, North, East, West)** – network with physicians in your neighborhood. Excellent venue to build relationships with community physicians. **Cost:** \$50 per year. Free for physicians in their first and second year in practice as well as new members.
2. **Young Physicians Organization** – network opportunities with physicians 40 yrs old or younger who are building their own referral base. **Cost:** \$25 per meeting.
3. **Volunteer for leadership positions with HCMS** – great networking opportunities (branch leadership, Young Physician Ambassadorships, committee participation, Delegate to the TMA, and more).

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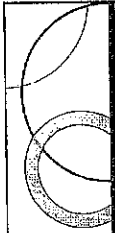


A. Marketing through physicians and other professional medical sources Cont.

2. *Hospitals* – Networking opportunities; Referral/advertising services offered, including patient and/or physician publications. Make your abilities and accomplishments known.

3. *Medical Associations* – Ethnic societies, specialty societies.

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B. Marketing through the general public/Professional Associations


B1) Define Your Preferred Patient Base:

- Personal and community demographics: population growth rate, age, ethnic groups, education level, average income, home values, etc.

B2) Identify Advertising Venues

- Professional Associations – Collaborate with other professional organizations whose professionals might be prone to specific types of injuries.
- Employers- Contact employers and offer brochures, periodic screenings and seminars.

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B. Marketing through the general public/Professional Associations Cont.

B2) Identify Advertising Venues

- *Community Events* - Seek out speaking opportunities (civic groups, women/ethnic organizations, PTO, etc.) and strategic volunteer opportunities (pediatrics – be the sports team physician).
- *Community Publications* – Advertisements, advertorials, weekly columns.
- *Welcome letters to new residents*- A Send letters that include your patient brochure, a map showing the location of your office, and the hospitals you are affiliated with. Contact real estate agencies in your area to purchase lists of new families and mail the packet to each of them.

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3b) Tool and Technology

- A) Own your image/brand on-line. The brand you build online should be consistent with the brand you build in person.
 - A1) Develop a website that reflects the image you wish to project to colleagues, patients and potential employees.
 - A2) Google yourself quarterly or set up a Google Alert with your name & practice name
 - A3) Social Media
- B) Utilize technology to improve communication with patients and referring physicians.

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3b) Tools and Technology

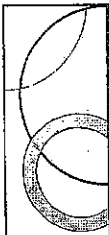
Utilize Technology to Maximize Results

A) Own your image/brand on-line

A1) Develop a website that reflects the image you wish to project to colleagues, patients and potential employees.

- Note unique information about your practice and philosophy of care.
- Make your abilities and accomplishments known.
- Explain your appointment, billing and insurance, and telephone policies. Cover such matters as missed appointments, prescription refills, emergency calls, and test result calls.
- Include a map and directions to the practice.
- Do not use testimonials from satisfied patients - Advertising containing testimonials regarding a physician's skill or the quality of the physician's professional services may be misleading or deceptive and therefore unethical.

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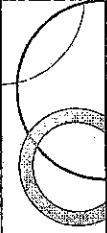


3b) Tools and Technology Cont.

A2) Google yourself quarterly to:

- ensure your brand is properly represented;
- uncover problems in your practice of which you may not be aware;
- ensure your contact information is correct
- Use optimization services to ensure your website and positive comments are at the top of the search page. Example:
www.reputation.com and
www.reputationmanagers.com

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Social Media

A3) Consider utilizing social media such as Face book, LinkedIn, Twitter – be aware of the investment in time. Must maintain current.

- Examples of communication with patients:
 - Bryan Vartabedian, MD (The Woodlands, Pediatric gastroenterologist): www.33charts.com (blog)
 - Marta Katalenas, MD (Round Rock, Pediatrician): <http://twitter.com/DrKatalenas>

- Examples of communication among peers:
 - www.sermo.com: an online physician community to enable physicians to collaborate on cases and exchange observations.
 - www.medscape.com/connect: physician-only discussion community provides a private forum where members can ask questions, share perspectives, and gain insights on topics relevant to practicing physicians.

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3b) Tools and Technology Cont.

B) Utilize technology to improve communications with patients and referring physicians

According to a recent consumer survey:

- 68% of consumers surveyed want to book, change or cancel physician appointments through via a mobile device.

- 63% want to receive reminders for preventative or follow-up care via their mobile phone

- 74% would like the ability to have telephone consultations with their doctors including via mobile phone

- 73 % would like to use a mobile device for requesting prescription refills

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3c) Determine a budget

There are lots of advertising venues. The challenge will be to identify the venues that will help you meet your goals.

For each venue determine the entire cost:

- Cost per event
- Cost of resources required to implement
- Cost to track the success of the venue

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Effective Marketing

Effective marketing requires a **plan**:

- ✓ 1. Identify your destination (**goals**)
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- ✓ 3. Get started (**tactics**)
4. Measure your progress (**reporting and analysis**)
5. Make course corrections as needed (**continuous improvement**)

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4. Measure your Progress (Reporting and Analysis)

A. Create Mechanisms to Track Costs and Returns on Investment:

- Determine frequency of use for each advertising venue
- Determine how results will be measured
- Review plan bi-annually to determine what adjustments should be made
- Network with colleagues and professional associations such as Medical Group Management Association to study best practices (www.mgma.com)

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4. Measure your Progress (Reporting and Analysis) Cont.

B. Track your referrals:

B1) Create a tracking mechanism to track referral sources from physicians and patients:

- Identify all your referring physicians and the referred payer mix & procedure. Do not focus just on volume of referrals. Focus on revenue generated.
- Identify NEW referring physicians & patients
- Identify top referring physicians & patients

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4. Measure your Progress (Reporting and Analysis) Cont.

B2) Maintain and grow the relationship:

- Communicate with all referring physicians regarding their patients in a manner preferred by them
- Communicate with all referring physicians regarding changes in your practice (new locations, new procedures, etc)
- Communicate with all referring physicians regarding increases and declines in referrals
- Communicate with all referring physicians on regular bases regarding your practice and theirs


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4. Measure your Progress (Reporting and Analysis) Cont.

- On regular basis: send a thank you note, make a call, conduct a brief visit . Get to know the staff. Meet new physicians in the referring practice.
- Be accessible. Make it easy for physicians to direct patients to you. Try providing referring physicians with any necessary forms or information sheets, including maps, phone numbers, or office hours. Train your staff to assist (i.e. systematize writing the thank-you note by putting a stamped envelope on a new patient's chart as a reminder.)
- Express your appreciation to patients who referred.

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4. Measure your Progress (Reporting and Analysis)
Cont.

- Take it to the next level:

Establish a VIP program aimed at generating even more referrals from your top referring partners, defined by the revenue they generate, not just volume.

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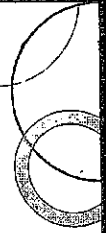


4. Measure your Progress (Reporting and Analysis) Cont.

C. Make a Plan for How to Keep the Patients You've Got

- Train your staff to deliver a service consistent with your image of the practice and strive to deliver a better patient experience.
- Utilize technology to increase efficiencies in service to patients for your staff and your patients (i.e. electronic forms).
- Invest in satisfaction surveys – most patient satisfaction criteria has little to do with the actual clinical care received. Study satisfaction reports such as Press Ganey Medical Practice Pulse Report . (www.pressganey.com). Survey current patients AND those who left your practice.


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5. Make course corrections as needed (continuous improvement)

- Strive to improve results, try new venues/tools.
- When successful, make goals more ambitious.
- Always look for efficiencies in the process.
- Most importantly, continue involving your staff. Their knowledge of the strategy and involvement are critical to your success. They are also the ones who know your practice best. Solicit their ideas.

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Additional Resources

- Ahuva Terk – (713) 524-4267 (ahuva_terk@hcms.org)
- Resource Guide
- TMA Knowledge Center: (800) 880-7955
- TMA – [www.texmed.org/Practice Help/Practice Operations/Marketing](http://www.texmed.org/Practice%20Help/Practice%20Operations/Marketing). Includes:
 - ✓ Practice Brochure template
 - ✓ Tips on how to improve customer satisfaction
 - ✓ How to stay in compliance re Medicare marketing rules, board certification, etc.

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The Morning Challenge

1. What is your marketing goal?
2. What will you say about your practice to a potential referring physician?
3. With what marketing venues will you start?
4. How will you measure progress?

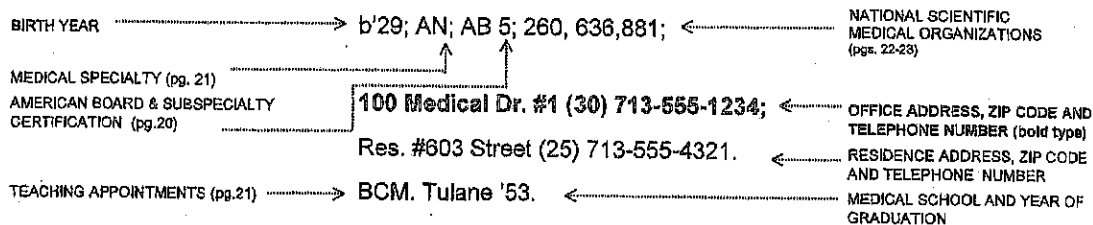
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**Marketing 101:
HCMS Resources to Develop Your Patient Base**

Supplementary Material

EXPLANATION OF CODES USED IN BIOGRAPHICAL DATA

WOLDEN, JAMES S.



AMERICAN BOARDS OF MEDICAL SPECIALTIES AND SUBSPECIALTY CERTIFICATES

- | | |
|---|---|
| <p>3 AMERICAN BOARD OF ALLERGY & IMMUNOLOGY
 3A Clinical & Laboratory Immunology</p> <p>5 AMERICAN BOARD OF ANESTHESIOLOGY
 5A Critical Care Medicine 5B Pain Medicine
 5C Hospice & Palliative Medicine 5D Pediatric Anesthesiology</p> <p>10 AMERICAN BOARD OF COLON & RECTAL SURGERY</p> <p>15 AMERICAN BOARD OF DERMATOLOGY
 15A Dermatopathology 15B Clinical & Laboratory
 15D Pediatric Dermatology Dermatological Immunology</p> <p>16 AMERICAN BOARD OF EMERGENCY MEDICINE
 16A Pediatric Emergency Medicine 16B Sports Medicine
 16C Medical Toxicology 16D Emergency Med Svcs</p> <p>16E Undersea & Hyperbaric Medicine
 16F Hospice & Palliative Medicine</p> <p>18 AMERICAN BOARD OF FAMILY MEDICINE
 18A Geriatric Medicine 18B Sports Medicine
 18C Adolescent Medicine 18D Sleep Medicine
 18E Hospice & Palliative Medicine</p> <p>19 AMERICAN BOARD OF MEDICAL GENETICS
 19A Molecular Genetic Pathology
 19B Medical Biochemical Genetics</p> <p>20 AMERICAN BOARD OF INTERNAL MEDICINE
 20A Adolescent Medicine
 20B Clinical Cardiac Electrophysiology
 20C Cardiovascular Disease
 20D Critical Care Medicine
 20E Clinical & Laboratory Immunology
 20F Endocrinology, Diabetes & Metabolism
 20G Gastroenterology 20H Geriatric Medicine
 20I Hematology 20J Infectious Disease
 20K Medical Oncology 20L Nephrology
 20M Pulmonary Disease 20N Rheumatology
 20O Sports Medicine 20P Allergy & Immunology
 20R Transplant Hepatology 20S Interventional Cardiology
 20T Sleep Medicine 20U Hospice & Palliative
 20V Advanced Heart Failure and Medicine
 Transplant Cardiology</p> <p>25 AMERICAN BOARD OF NEUROLOGICAL SURGERY</p> <p>28 AMERICAN BOARD OF NUCLEAR MEDICINE</p> <p>30 AMERICAN BOARD OF OBSTETRICS & GYNECOLOGY
 30A Critical Care Medicine 30B Gynecologic Oncology
 30C Maternal & Fetal Medicine 30D Reproductive Endocrinology/
 30E Hospice & Palliative Medicine Infertility
 30F Female Pelvic Medicine & Reconstructive Surgery</p> <p>35 AMERICAN BOARD OF OPHTHALMOLOGY</p> <p>40 AMERICAN BOARD OF ORTHOPAEDIC SURGERY
 40A Surgery of the Hand 40E Orthopedic Sports Medicine</p> <p>45 AMERICAN BOARD OF OTOLARYNGOLOGY
 45B Neurotology 45D Sleep Medicine</p> <p>50 AMERICAN BOARD OF PATHOLOGY
 50A Blood Banking/Transfusion Medicine
 50B Chemical Pathology 50C Cytopathology
 50D Dermatopathology 50E Forensic Pathology
 50F Hematology 50G Immunopathology
 50H Medical Microbiology 50I Neuropathology
 50J Pediatric Pathology 50M Clinical Informatics
 50N Molecular Genetic Pathology</p> | <p>55 AMERICAN BOARD OF PEDIATRICS
 55A Adolescent Medicine
 55B Pediatric Cardiology
 55C Pediatric Critical Care Medicine
 55D Clinical & Laboratory Immunology
 55E Pediatric Gastroenterology
 55F Pediatric Infectious Disease
 55G Pediatric Endocrinology
 55H Pediatric Hematology/Oncology
 55I Pediatric Nephrology
 55J Pediatric Emergency Medicine
 55K Pediatric Pulmonology
 55L Neonatal-Perinatal Medicine
 55M Pediatric Rheumatology
 55N Pediatric Sports Medicine
 55O Pediatric Allergy & Immunology
 55P Medical Toxicology
 55Q Developmental-Behavioral Pediatrics
 55R Neurodevelopmental Disabilities
 55S Sleep Medicine
 55T Pediatric Transplant Hepatology
 55U Hospice & Palliative Medicine
 55V Child Abuse Pediatrics</p> <p>60 AMERICAN BOARD OF PHYSICAL MEDICINE & REHABILITATION
 60A Spinal Cord Injury Medicine
 60B Pain Medicine
 60C Pediatric Rehabilitation Medicine
 60D Neuromuscular Medicine
 60E Hospice & Palliative Medicine
 60F Sports Medicine</p> <p>65 AMERICAN BOARD OF PLASTIC SURGERY
 65A Surgery of the Hand</p> <p>70 AMERICAN BOARD OF PREVENTIVE MEDICINE
 70B Medical Toxicology 70D Clinical Informatics
 70C Undersea & Hyperbaric Medicine</p> <p>75 AMERICAN BOARD OF PSYCHIATRY & NEUROLOGY
 75A Addiction Psychiatry 75B Child & Adolescent Psychiatry
 75C Geriatric Psychiatry 75D Clinical Neurophysiology
 75E Forensic Psychiatry 75F Neurodevelopmental Disabilities
 75G Pain Medicine 75H Psychosomatic Medicine
 75I Neuromuscular Medicine
 75J Hospice & Palliative Medicine
 75K Sleep Medicine 75L Vascular Neurology
 75M Epilepsy</p> <p>80 AMERICAN BOARD OF RADIOLOGY
 80A Nuclear Radiology 80B Neuroradiology
 80C Pediatric Radiology
 80D Vascular & Interventional Radiology
 80E Hospice & Palliative Medicine</p> <p>85 AMERICAN BOARD OF SURGERY
 85A Vascular Surgery 85B Surgery of the Hand
 85C Pediatric Surgery 85D Surgical Critical Care
 85E Hospice & Palliative Medicine</p> <p>90 AMERICAN BOARD OF THORACIC SURGERY
 90A Congenital Cardiac Surgery</p> <p>95 AMERICAN BOARD OF UROLOGY
 95A Pediatric Urology 95B Female Pelvic Medicine &
 Reconstructive Surgery</p> |
|---|---|

CODES FOR SELF-DESIGNATED PRACTICE SPECIALTIES

PRACTICA Allergy	HS Hand Surgery	PCS Pediatric Cardiothoracic Surgery
ACA Adult Cardiothoracic Anesthesiology	HSO Hand Surgery, Orthopedic Surgery	PD Pediatrics
ADL Adolescent Medicine, Pediatrics	HSP Hand Surgery, Plastic Surgery	PDA Pediatric Allergy
ADM Addiction Medicine	IC Interventional Cardiology	PDC Pediatric Cardiology
ADP Addiction Psychiatry	ICE Cardiac Electrophysiology, Clinical	PDD Pediatric Dermatology
AI Allergy and Immunology	ID Infectious Diseases	PDE Pediatric Endocrinology
ALI Allergy and Immunology, Clinical and Laboratory Immunology	IFP Internal Medicine, Family Practice	PDI Pediatric Infectious Disease
AM Aerospace Medicine	IG Immunology	PDO Pediatric Otolaryngology
AMF Adolescent Medicine, Family Medicine	ILI Clinical and Laboratory Immunology, Internal Medicine	PDP Pediatric Pulmonology
AN Anesthesiology	IM Internal Medicine	PDR Pediatric Radiology
APM Pain Medicine, Anesthesiology	IMG Geriatric Medicine, Internal Medicine	PDS Pediatric Surgery, Surgery
AR Abdominal Radiology	IPM Internal Medicine, Preventive Medicine	PEM Pediatric Emergency Medicine
AS Abdominal Surgery	ISM Sports Medicine, Internal Medicine	PFP Forensic Psychiatry
ASO Advanced Surgical Oncology	LM Legal Medicine	PG Pediatric Gastroenterology
ATP Anatomic Pathology	MDM Medical Management	PHL Phlebology
BIN Brain Injury Medicine	MFM Maternal and Fetal Medicine	PHM Pharmaceutical Medicine
BBK Blood Banking/Transfusion Medicine	MG Medical Genetics	PHO Pediatric Hematology/Oncology
CAP Child Abuse Pediatrics	MGP Molecular Genetic Pathology, Pathology	PHP Public Health & General Preventative Medicine
CCA Critical Care Medicine, Anesthesiology	MM Medical Microbiology	PLM Palliative Medicine
CCG Clinical Cytogenetics	MPD Internal Medicine/Pediatrics	PM Physical Medicine and Rehabilitation
CCM Critical Care Medicine, Internal Medicine	MSR Musculoskeletal Radiology	PME Pain Management
CCP Pediatric Critical Care Medicine	N Neurology	PMG Pediatrics/Medical Genetics
CCS Critical Care Surgery	NC Nuclear Cardiology	PMM Pain Medicine
CD Cardiovascular Diseases	NDN Neurodevelopmental Disabilities, Psychiatry & Neurology	PMP Pain Medicine, Physical Med & Rehab
CFS Craniofacial Surgery	NDP Neurodevelopmental Disabilities, Pediatrics	PMR Pain Management, Phys Med & Rehab
CG Clinical Genetics	NEP Nephrology	PN Pediatric Nephrology
CHN Child Neurology	NM Nuclear Medicine	PO Pediatric Ophthalmology
CHP Child and Adolescent Psychiatry	NMN Neuromuscular Medicine	PP Pediatric Pathology
CHS Congenital Cardiac Surgery, Thoracic Surgery	NO Neurology/Otology	PPM Pediatric Physical Medicine and Rehab
CIM Clinical Informatics	NP Neuropathology	PPR Pediatric Rheumatology
CLP Clinical Pathology	NPM Neonatal-Perinatal Medicine	PRD Procedural Dermatology
CN Clinical Neurophysiology	NPR Neurology, Physical Medicine & Rehab	PRO Proctology
CRS Colon and Rectal Surgery	NR Nuclear Radiology	PRS Sports Medicine, Physical Medicine and Rehabilitation
CS Cosmetic Surgery	NRN Neurology/Diagnostic Radiology/Neuroradiology	PS Plastic Surgery
CTR Cardiothoracic Radiology	NS Neurological Surgery	PSH Plastic Surgery within the Head & Neck
D Dermatology	NSP Pediatric Surgery, Neurology	PSM Pediatric Sports Medicine
DBP Developmental-Behavioral Pediatrics	NTR Nutrition	PTH Pathology, Anatomic/Clinical
DDL Dermatological Immunology, Clinical and Laboratory	NUP Neuropsychiatry	PTP Pediatric Transplant Hepatology
DIA Diabetes	OAR Orthopedic Surgery, Adult Reconstructive	PTX Medical Toxicology, Preventive Medicine
DMP Dermatopathology	OBG Obstetrics and Gynecology	PUD Pulmonary Diseases
DR Diagnostic Radiology	OBS Obstetrics	PYA Psychoanalysis
DS Dermatologic Surgery	OCC Critical Care Medicine, Obstetrics and Gynecology	PYG Geriatric Psychiatry
EM Emergency Medicine	OFA Foot and Ankle, Orthopedic Surgery	PYM Psychosomatic Medicine
END Endocrinology, Diabetes and Metabolism	OM Occupational Medicine	R Radiology
EP Epidemiology	OMF Oral & Maxillofacial Surgery	REN Reproductive Endocrinology and Infertility
EPL Epilepsy	OMM Osteopathic Manipulative Medicine	RHU Rheumatology
ESN Endovascular Surgical Neuroradiology	ON Oncology, Medical	RNR Neuroradiology
FM Family Medicine	OP Pediatric Orthopedics	RO Radiation Oncology
FOP Forensic Pathology	OPH Ophthalmology	RPM Pediatric Rehabilitation Medicine
FPG Geriatric Medicine, Family Medicine	OPR Ophthalmic Plastic & Reconstructive Surgery	SCI Spinal Cord Injury Medicine
FPR Female Pelvic Medicine & Reconstructive Surgery, OB/Gyn	ORS Orthopedic Surgery	SME Sleep Medicine
FPS Facial Plastic Surgery	OS Other Specialty	SO Surgical Oncology
FSM Sports Medicine, Family Medicine	OSM Sports Medicine, Orthopedic Surgery	SP Selective Pathology
GE Gastroenterology	OSS Orthopedic Surgery of the Spine	TRS Trauma Surgery
GO Gynecological Oncology	OTO Otolaryngology	TS Thoracic Surgery
GP General Practice	OTR Orthopedic Trauma	TTS Transplant Surgery
GPM General Preventive Medicine	P Psychiatry	U Urology
GS General Surgery	PA Pharmacology, Clinical	UCM Urgent Care Medicine
GYN Gynecology	PAN Pediatric Anesthesiology	UM Undersea & Hyperbaric Medicine, Preventive Medicine
HEM Hematology, Internal Medicine	PCC Pulmonary Critical Care Medicine	UP Pediatric Urology
HEP Hepatology	PCH Chemical Pathology	UPR Female Pelvic Medicine, Urology
HMP Hematology, Pathology	PCP Cytopathology	US Unspecified
HNS Head and Neck Surgery		VIR Vascular and Interventional Radiology
HO Hematology/Oncology		VM Vascular Medicine
HOS Hospitalist		VN Vascular Neurology
HPM Hospice & Palliative Medicine		VS Vascular Surgery

CODES FOR LOCAL MEDICAL SCHOOL TEACHING APPOINTMENTS

BCM Baylor College of Medicine	UTMDACC University of Texas/MD Anderson Cancer Center
TAM Texas A & M	UTGSBS University of Texas Graduate School of Biomedical Sciences
UTMB University of Texas Medical Branch, Galveston	UTSPH University of Texas School of Public Health
UTH University of Texas Medical School at Houston	WMC Weill Medical College of Cornell University
UTDB University of Texas Dental Branch	

Members supply their own information for the Roster and are responsible for its accuracy. The self-designated practice specialties utilized in the Roster are those recognized by the American Medical Association and do not imply "recognition" or "endorsement" of any field of medical practice. The American boards are those in effect approved by the American Board of Medical Specialties. Foreign examining boards are not listed. The specialty shown in each biography is that supplied by the member from the recognized list and does not necessarily constitute certification by the appropriate specialty board.

HCMS brings CME close to you!

Attend your branch meeting

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CENTRAL BRANCH includes the area within the 610 Loop

Meetings are held three times a year at various locations in the branch area. *Networking Reception at 6 p.m.; Dinner and Program at 7 p.m.*

EAST BRANCH includes the Baytown, Channelview, LaPorte, Highlands and Crosby areas

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For more information on branch meetings, please call **713-524-4267**. To find out which branch you belong to, refer to the "Physicians by Specialty" pages of the *HCMS Pictorial Roster*.

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The following is an alphabetical listing of physician members by self-designated practice specialties. Each physician may have up to four specialty listings. The last two digits of the physician's primary office address postal zip code follow the name. You may use this information to refer a patient to a physician by geographical location. A postal zip code map is included on page 24. Office locations outside of Houston zip codes (770__), are designated below. Those zip codes not listed here are outside of the Harris County area. Please refer to the biography for the address.

77001-77293Houston	77429, 77433Cypress	77520-22Baytown
77301-05Conroe	77449-50, 77492-77494Katy	77532Crosby
77338-39, 77345-47, 77396Humble	77459, 77489Missouri City	77536Deer Park
77339, 77345Kingwood	77469Richmond	77546Friendswood
77365Porter	77477Stafford	77562Highlands
77373, 79-82, 86, 88-90Spring	77478-79Sugar Land	77568LaMarque
77375, 77377Tomball	77484Waller	77571LaPorte
77380-82, 77384Woodlands	77501-07Pasadena	77581, 77584Pearland
77396Humble	77551-52Galveston	77583Rosharon
77401-02Bellaire	77511Alvin	77586Seabrook
77411Alief	77515Angleton	77587South Houston
77413Barker	77518Bacliff	77598Webster

HCMS is divided into six geographic Branch Societies. Each physician has been assigned to the Branch Society nearest to his or her primary office address. The abbreviation following the zip code indicates the Branch Society area in which a physician practices. Below is a list of the zip codes within each Branch Society. For more information on HCMS Branch Societies, turn to pages 623-625. This branch designation also can be used for patient referrals as physicians match patients to colleagues in the same part of town.

Central Branch - C

77002, 77003, 77004, 77005, 77006, 77007, 77008, 77009, 77010, 77011, 77019, 77020, 77021, 77023, 77025, 77026, 77027, 77030, 77045, 77046, 77047, 77050, 77054, 77098

East Branch - E

77013, 77015, 77029, 77049, 77520, 77521, 77522, 77530, 77532, 77571

North Branch - N

77014, 77016, 77018, 77022, 77028, 77032, 77037, 77038, 77039, 77040, 77044, 77060, 77064, 77065, 77066,

North Branch continued

77067, 77068, 77069, 77070, 77073, 77076, 77078, 77086, 77088, 77090, 77091, 77092, 77093, 77301, 77304, 77338, 77339, 77345, 77346, 77365, 77373, 77375, 77377, 77379, 77380, 77381, 77382, 77384, 77386, 77388, 77389, 77396, 77429, 77433

Southeast Branch - SE

77012, 77017, 77033, 77034, 77048, 77051, 77058, 77059, 77061, 77062, 77075, 77087, 77089, 77502, 77504, 77505, 77506, 77507, 77511, 77518, 77536, 77539, 77546, 77547, 77562,

Southeast Branch continued

77565, 77573, 77581, 77584, 77586, 77587, 77598

Southwest Branch - SW

77031, 77035, 77036, 77042, 77053, 77056, 77057, 77063, 77071, 77072, 77074, 77081, 77082, 77083, 77085, 77096, 77099, 77401, 77459, 77469, 77477, 77478, 77479, 77489

Western Branch - W

77024, 77041, 77043, 77055, 77077, 77079, 77080, 77084, 77094, 77095, 77449, 77450, 77484, 77493, 77494

The Practice Listings section on pages 72-77 provides additional information on some members.

ADDICTION MEDICINE (ADM)

Abrons, Stephanie C. (76) N
Brown, William C. (80) E
Cardona, Emilio R. (30) C
Corke, Patricia P. (58) SE
Degner, Eugene A. (77401) SW
Faust, Harry L. Jr. - SE
Fields, Harold J. (24) W
Fields, Clive K. (24) W
Ginsberg, Lawrence D. (90) N
Glass, George S. (27) C
Griffin, Darrell A. (77532) E
Kay, David C. (55) W
Pierre, James D. (02) C
Santos, George D. (56) SW

ADDICTION PSYCHIATRY (ADP)

Karam, Maher A. (30) C
Keller, Wayne F. (90) SE
Krell, Ted W. (77520) E
Noel, Richard L. (90) N
Parkh, Ramesh R. (54) C
Ravichandran, Guruswami K. (81) SW
Woodham, Robert L. (81) SW

Wright, James R. III (14) N

ADULT CARDIOTHORACIC ANESTHESIOLOGY (ACA)

Davila-Perez, Ruben F. (57) SW
Duncan, Scott W. (24) W
Mohindra, Prita K. (30) C
Sheppard, Shaina M. (30) C
Thakar, Dilip R. (30) C
Tsai, January Y. (30) C
Varner, William T. (57) SW

ADVANCED SURGICAL ONCOLOGY (ASO)

Katz, Matthew H. (30) C

AEROSPACE MEDICINE (AM)

Arenare, Brian (10) C
Behaine, Jorge O. - SW
Douglas, Glen A. (02) C
Duke, Herbert H. Jr. (77521) E
Fitzpatrick, Daniel T. (58) SE
Fujii, Mavis D. (58) SE
Grayson, R. Stephen (77339) N
Harris, Bernard A. Jr. (56) SW

Jackson, J. Stuart (57) SW
Joe, John C. (77225) C
Parrish, Rob G. (30) C
Sprague, Donald E. (77565) SE
Trant, David B. - E

ALLERGY (A)

Bethea, Louise H. (77380) N
Chavda, Jay (74) SW
Davis, Carla M. (30) C
Engler, David B. (54) C
Harrison, Lyndall F. (25) C
Haywood, Theodore J. (77401) SW
Hotze, Steven F. (77450) W
Jacob, Susan C. (77375) C
Lee, Lyna K. (77401) SW
Levy, Steven R. (92) N
Lu, Hui-fang (30) C
Malick, Alnoor A. (77504) SE
Matorin, Phillip A. (82) SW
Moore, Walter P. III (77339) N
Perez, Joseph R. C. (77478) SW
Roark, David T. (63) SW
Rountree, Carl B. (08) C
Sandberg, Eric T. (25) C
Saraf, Sunil K. (77584) C

Schreiber, Douglas K. (65) N
Shirley, L. Reed (77478) SW
Shroff, Puneet (02) C
Thorne, Lawrence G. (77401) SW
Weakley, Suzanne (70) N
Wells, Regina D. (15) SE

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Abdelsayed, Dallal W. (77562) SE
Alim, Naureen (30) C
Allison, Leslie J. (77450) W
Amran, David (77479) SW
Anmuth, David M. (54) C
Barbandi, Farouk (77521) E
Bethea, Louise H. (77380) N
Bhutani, Sumit (70) N
Bioebaum, R. Matthew (77379) W
Bommanna, Vasudeva M. (77598) SE
Brown, Lewis A. (77478) SW
Burruss, Robert S. (70) N
Chang, Eduardo E. (77384) N
Chinen, Javier (77346) N
Choo, Eugene M. (65) N
Chou, Michael L. (77584) SW
Collaco, Christopher R. (25) SW



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You've been criticized online — now what? Monitoring your online reputation

by William Malamon of TMLT

The Internet has empowered patients, allowing them to look up their symptoms, do a good job of informing themselves before an office visit, and take more responsibility for their care. (1)

The Internet has also become a place for patients to voice their dissatisfaction with their physicians and the treatment they receive. Some patient blogs have become settings for patients to denigrate their physicians. Consider the following sequence of events. A patient, disappointed with a medical outcome, launches a blog that includes professional and personal attacks against the physician. Other "anonymous" patients join in and post negative comments. The physician's staff, patients, colleagues, and family all see the comments. When the physician performs a Google search for the name of the practice, the negative comments come up third on the list. Many physicians have found themselves in a similar predicament. When it comes to online, anonymous comments, what recourse do physicians have? This article will explore the actions that physicians can consider taking if they are attacked online with negative comments.

Let it go

False personal attacks are ugly and cause distress. The attacks sting even more when they are made on the Internet for all the world to see. However, according to risk management and claim management staff at TMLT, the best action for the physician may be to ignore the comments.

"This is hard for physicians to hear, but because of health care privacy laws, physicians cannot respond online," says Jane Holeman, vice president of risk management at TMLT. "The risk of violating HIPAA is real. By responding online you are acknowledging that this is your patient."

HIPAA requires physicians to protect the identity of their patients. According to an article from the *Dallas Medical Journal*, "privacy laws in health care will not allow physicians to defend themselves in the same manner. The fact that even a patient's identity is protected information directly hinders the physician's ability to refute a complaint. Simply acknowledging publicly that the complaining party is a patient breaches confidentiality and violates HIPAA laws." (2)

To avoid violating HIPAA laws, some physicians may consider responding to the comments anonymously. This is also not advisable. There is no such thing as anonymity on the web. IP addresses (unique numbers that identify computers accessing the Internet) act as a fingerprint and can identify the

user's computer. "Physicians should also consider that whatever you write cannot be taken back and may remain on the Internet for a very long time," says Holeman.

If the complaints indicate that the patient is considering legal action, the physician should contact his or her medical liability insurance company as soon as possible. "If a patient makes an accusation of medical malpractice, it is even more important that you do not reply online," says Jill McLain, senior vice president of claim operations at TMLT. "Anything said in response could be used in the claim against the physician." Physicians, understandably frustrated with the situation, may ask themselves what they can do in the face of online criticism. "One option is to ask yourself if the patient has a point," says McLain. "Take a look at the comments and see if there is a grain of truth to them. Is there room for improvement in your care or office policies?"

Physicians can also consider giving patients more constructive ways to offer their feedback. "Conducting a patient survey, for example, would be a good way for patients to express their dissatisfaction and feel empowered," says McLain.

When investigating complaints, Holeman advises that physicians ask the following questions. Is the complaint legitimate? Was the problem with a procedure, a staff member, or the patient's wait time? Can action be taken to fix the problem?

"It can also be helpful to tell patients that they can contact you if they are disappointed with their care. This keeps the door open and lets patients know that you care about their experience in your practice," says Holeman.

Discuss the matter in person

Another option is available if the physician can identify the patient making the complaints — talk to the patient directly. This can be done over the phone or in person, but the conversation should not occur via email because the email could end up on the Internet.

"When it occurs, this conversation should proceed with caution," says Holeman. "The physician-patient relationship has obviously been damaged, otherwise the patient would not be posting negative comments on the Internet. Begin by asking the patient why he or she is dissatisfied."

In some cases it may not be possible to repair the physician-patient relationship. "The relationship between a physician and a patient is based on trust; a patient who posts complaints is communicating to everyone reading that he or she does not trust the physician. The physician should evaluate the patient-

physician relationship and determine if the level of trust is enough to promote the highest quality of care." (2)

Contact the web publisher

Physicians can also try to contact the web publisher and ask to have the comments removed. A publisher may be convinced to remove the comments if given a good reason.

When contacting a web publisher, sending an email is fine, but a phone call may work better. The physician should ask for the web publisher's content removal policies, which will help determine the best way to approach the request. Before making a request, the physician should gather the evidence, present the evidence, and be mindful of his or her tone of voice. (3)

Take legal action

Individuals who have been defamed on the Internet and who have tried to take legal action against web publishers have met with little success. Web developers can take advantage of the protections in the Communications Decency Act of 1996. The act "provides immunity to sites, so the hosts are not responsible for what the users post." (4) The immunity is usually absolute unless the physician can show that the publisher was actually the source of the disparaging comments.

In spite of this, if certain conditions are met, a physician can try to sue for libel. "If a physician is identified, and if he or she can prove damages and that the statement is untrue, then there may be a case for libel," says Jill McLain. Any physician considering a libel suit should first consult an attorney experienced in defamation litigation.

However, libel cases are costly and time consuming, and there is often no benefit to the physician except to have the negative comments taken down. (2) "There have been cases of physicians suing hospitals or other physicians for slander or libel over conflicts during peer-review or credentialing. These cases had mixed results." says McLain.

Before considering legal action, McLain reiterated, "Take an honest look at yourself and your practice and determine if there is room for improvement. Take steps to improve your practice and let your patients know those steps."

Conclusion

It is safe to assume that some of your patients are active on blogs and other patient comment sites. To find out what is being said, conduct web searches on yourself and your practice regularly. If you

maintain a web site, it should come up first on the search. Review the first 30 hits of the search. (Any hit past 30 is generally considered extraneous and not likely to be read.) (5) Among the top 30 hits, what are these sites saying about you? Continue to monitor these online discussions.

Only a small minority of patients post negative online comments. The Internet also offers many opportunities to physicians. Start your own web site to highlight your practice. Learn to use the Internet, blogs, and Google searches to your advantage; they can help you cultivate a positive brand and market to new patients. Becoming active on the Internet is one way to manage your online reputation before it manages you.

Where to search

The following sites can be used to search for comments about your practice.

- Social mention
- Google blog search
- Blog search engine
- Technorati
- Icerocket
- Sphere
- Blog Scope
- Bloglines

Sources

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3. Mayor T. Erasing your tracks. *Computer World*. November 17, 2008.
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5. Hoffman T. Online reputation management; cleaning up your image is hot, but is it ethical? *Computer World*. February 12, 2008.

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Marketing & Public Relations(cont.)

MedLanding - <http://medlanding.com/>

Bonnie Rose- (214) 846-0853 brose@medlanding.com

MedLanding is a specialized healthcare destination focusing on healthcare business professionals who want to achieve more, learn about new ideas and experience higher levels of success.

Small Screen Producer - <http://smallscreenproducer.com/>

Pam Vinje - (281) 569-4370 pvinje@smallscreenproducer.com

Digital media marketing, web design, video production and mobile marketing services include social media, reputation management and content marketing.

Spotlight Creative, LLC - <http://www.spotlightcreative.com/>

Kimberly Abey - (281) 970-3800 kim@spotlightcreative.com

Marketing, branding & graphic design

Tech Nation - <http://www.avtechnation.com/>

Kelly Brooks (832)201-3184 kbrooks@avtechnation.com

Audio video integration, DirecTV, and digital advertisement

Valassis Communications Inc. - www.valassis.com

Tim Raymond – (713) 725-0654 ttraymond@valassis.com

Targeted advertising - mail, print, online, email media optimization www.valassis.com

Referrals

DocBookMD - <http://docbookmd.com/>

Chad Shelpler - (512) 383-5822 chad@docbookmd.com

Designed to streamline physician tasks and improve communication between physician colleagues. Additionally, the app helps protect them from HIPPA violations and build their network to increase referrals and improve care coordination.

Medifr - <https://www.medifr.com/> *Thank you for sponsoring tonight's event!*

Jessica Kirkland - (832) 465-3045 jessica.kirkland@emedifr.com

As a doctor to doctor referral software, our goal is to simplify the referral process.

SnapHealth - <https://www.snaphealth.com/>

Barbra Allen - (281) 673-6847 barbra@snaphealth.com

SnapHealth sends doctors new patients that pay upfront in full without insurance as the middle man.

Web Page Design and Search Engine Optimization

Epromotions - <http://www.andyalagappan.com/>

Andy Alagappan – (281) 570-5804 andy.alagappan@gmail.com
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Healthcare Business Solutions - <http://www.rsthbs.com/>

Raheel Kahn - (713) 376-9134 rkhan@rsthbs.com

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Web Page Design and Search Engine Optimization (cont.)

iHealthSpot, Inc. - <http://www.ihealthspot.com/>

Mary Hall - (877) 709-0999 sales@ihealthspot.com

iHealthSpot is America's leading web development, hosting, internet marketing and patient education provider, delivering cutting-edge solutions to medical practices. Our award-winning product includes full-featured websites with custom designs, secure interactive forms for appointment requests, patient registration, and prescription refills, online pay, electronic medical records delivery, easy tools for editing content, complete search engine optimization, mobile website development, social media services and physician developed patient education. ***SPECIAL OFFER for HCMS Members! 10% off any website package! (Refer to offer code: HCMS10)***

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Pam Vinje – (281) 569-4370 pvinje@smallscreenproducer.com

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Patient Satisfaction Surveys

Press Ganey

Jay Duval – (866) 922-7072 jduval@pressganey.com

AMA members will be able to purchase the patient satisfaction tool at special introductory rate. More information is available at: <http://medpractice.pressganey.com/> or www.ama-assn.org/go/patientexperience.