

## Referral Targeting

# Re-engaging Lost Referral Sources in a Post-COVID Environment

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Of all the industries that underwent a disruptive change over the past year and a half, healthcare must be near the top with regards to structural disruption. Ideas and future-looking concepts (like the digital health home and virtual visits) which just a few years ago looked to be decades away, moved from concept to reality in days and weeks. Patients were asked to follow new processes and procedures – with experiences giving a backseat to practicality. Health systems that were once relatively open (allowing for collaboration and idea flow) were locked down like Fort Knox, limiting access to only those where it was necessary to come in.

One casualty of this changed behavior was referral sales – where sales reps who traditionally had reasonably good access to facilities were no longer allowed to meet with physicians and discuss the benefits and differentiation of their solutions. Across the country, discussions were shifted to limited online meetings and email-based outreach. As things opened back up, many distributed health organizations are attempting to re-engage physicians and finding that they need to re-think how they engage again.

Re-engaging sales in a referral marketing environment often means taking a fresh-eyed look at what's transpired over the past year. Data can help us get more intelligent about how and where to start this activity. A recent client example highlights the importance that data provides – allowing you to accelerate those relationship development activities while having the most impact.



### Restarting a Referral Engine – The Challenge

After weathering the initial volume drops that COVID brought, a large outpatient PT provider was finding that new patient referrals were not recovering as fast as they had initially projected. Compounding the issue was that other competitors in the industry seemed to be making good recovery progress and the implication was that this company was losing share. As part of the COVID management actions, there was a major reduction in the referral sales organization and while plans were underway to build the team back, immediate efforts were needed to help accelerate the recovery using the existing team.

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### Restarting a Referral Engine – Leveraging Data to Drive Smart Targeting

Referral sales is a relationship game. It takes regular interactions with a provider (and their office) to create mindshare and trust. Any major disruption can allow a competitor to come in and take that relationship away. Therefore, we knew that if we wanted to fix the relationships, we had to first focus on where the relationships had eroded. Using data extracted from Salesforce, the EMR and External Claims Warehouses, we were able to quickly identify where relationship touches decreased and how much impact that was having on referrals. Through a rapid prioritization effort, we were able to narrow a referral pool of 160K potential sources down to 5K high-potential targets that the existing sales team could work while HR worked to bring additional people on-board.

Example: Prioritizing Referring Physicians



*With over 150K potential referral sources to focus on, you must be prescriptive on where to spend time. Using sales, referral and market data, we can identify the referring physicians that offer the most headroom for growth while being easier to convert.*

### Key Learnings to Takeaway

1. **Events Matter** – relationship sales is a visits game. Use data to determine where you have slowed visits and how much impact that is having on referral behavior
2. **Isolate the Decliners** – referring providers that have had significant declines are the best opportunities for build back. Understand what has happened and build targeted plans to re-engage. Monitor activity and impact weekly
3. **Look Beyond Internal Data** – leveraging external data sources can help you understand the broader headroom for growth and identify new referral opportunities. While your decliners are your first priority, not all decliners are created equal.
4. **Prioritize, Prioritize, Prioritize** – building back these relationships will take continued visits (every week, every month, etc.) which limits sales capacity. Be very targeted early on to understand where to spend the time

### Restarting a Referral Engine – A Multi-faceted Impact

Using data to re-start the referral engine has had meaningful impact, even early in the program. Sales teams are more engaged because they have very specific targets and an energy to re-build relationships that they didn't necessarily realize had eroded so far. There's internal motivation to go...and that pays off in results as physician offices are starting to re-engage. Building back relationships can take time but focusing on a very targeted group of referrers and designing specific actions to get back to the offices regularly can go a long way in restarting the referral engine.