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PATIENT CONVERT PODCAST











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Patient Convert Podcast with Kelley Knott

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Patient Convert Podcast – Dr. Kaplan #106:

Kelley Knott: [00:00:06] Hello and thank you, everyone, for joining me for another episode of the Patient Converge podcast. I am so excited to welcome Dr. Jonathan Kaplan with me today. So, Dr. Kaplan, introduce yourself. Tell my audience who you are, where you're located and what we're going to be talking about today.

Dr. Kaplan: [00:00:26] Sure. Happy to be here. I'm Jonathan Kaplan on a board certified plastic surgeon based in San Francisco. I'm originally from Alexandria, Louisiana. Practice after I finish my plastic surgery fellowship at Cleveland Clinic, I practice in that region, Indiana, for about six years. And then my wife and I will chair. Six and a half years ago,.

Dr. Kaplan: [00:00:44] I took over an existing practice, purchased a practice from my doctor, Sarah, between being a part of corporate medicine, being employed physician in Louisiana and now being in private practice, I've got a few different perspectives on on the whole health care industry and just the experience of buying a practice and trying to get busy built ramp up the practice because of previous doctors have slowed things

down a bit. But it's been an interesting ride and I feel like I have have some information, some interesting tidbits I can offer to your listeners.

Kelley Knott: [00:01:16] Oh, absolutely. I know so many physicians I can relate to that. I'm sure it can be a really confusing and almost overwhelming process going from an employed physician kind of working and grinding for another practice to actually having them manage the business on your own. Now, you guys are specialists when it comes to medical, but now you have to be business owners soon. I know somebody my physicians talk about, you know, what do we need to be focusing on? How do we make that transition? So what is some advice you have for physicians either considering it or what was something in your experience that really stood out during that transition?

Dr. Kaplan: [00:01:52] Well, I think that, you know, when people were coming out of training, they they don't always they think they know what they want, but maybe they don't really know what they want. In the sense that, you know, after maybe five years and practice after their training, they realize that's when they're going to get a better idea of what they want to do with the rest of their career. And so that was what I thought was good about coming right out of training, becoming an employee physician, because it gave me some time to figure out what were my likes and dislikes, what I really want to specialize in.

Dr. Kaplan: [00:02:19] So I would definitely recommend people to not necessarily buy a practice right out of training because we kind of don't have a real estate deal like a whole health care environment was like. And so you might be expecting, you know, have had these really high expectations or how much money is she making? And you might be really disappointed, which is why a lot of practices that are purchased right on training with the new doctor buys into the practice or they really are disappointing and they end up it brings up breaking up and everybody's very unhappy. So we definitely recommend give it a few years before you really connect to something. And then so that when I was looking at buying the practice, you know, I had an attorney review the doctors records. I had to have a health care attorney draw up the contract. And it ended up being a really good business decision because I've actually written about this and published these numbers that you don't always know how much people pay for practices or how many patients actually stay behind.

Dr. Kaplan: [00:03:17] I bought the practice for including in an office operating room. That was one of the things I really wanted was an accredited operating room. So that's one thing you want to reinforce something that is more than just a good well, more than just the patient lost vision on how many of those are part. But so I bought the practice having an accredited operating room bought it all for one hundred ninety one thousand dollars. And then when we looked at it to see how many people stayed behind, we actually took a snapshot after five years. And you'd be shocked at how few patients actually come back to see a doctor. And I don't think it's just me. I think it's just, you know, they get used to seeing that previous doctor and ended up being a total percentage of patients that came back with eight point six six percent.

Dr. Kaplan: [00:03:56] It was really low. Yeah.

Kelley Knott: [00:03:59] Wow! would never guess that I would think at most 50.

Dr. Kaplan: [00:04:02] Like at lowest, I was going to ask you what you were to guess, what number it was, what I was afraid you would like. Just five percent.

Dr. Kaplan: [00:04:10] It wouldn't be so good. But yeah, but when we looked at the numbers, though, that 8.6 six percent ended up spending enough money to where I ended up having a three hundred twelve percent are why after five years. So it ends up been a very good decision. So you know, like the average that every patient paid was like \$11000. Excuse me. Well, that was a surgical patients. But all of it tells us that on average, every patient pays about \$5,000. So it hasn't been a really good decision. But but, you know, you've got to go into it knowing that you don't know how many patients you're really going to come back to see, no matter how great you think they are. They don't really care. They thought the previous guy was really great. But but that's why that's kind of goes back to my recommendation of get more than just a patient list. Make sure you get something like an accredited operating room. I mean, that's so that we can start making money right off the bat. But that was my experience of buying the practice.

Kelley Knott: [00:05:03] Well, that's pretty crazy numbers, like I said, I would have never guessed that. But then even having such a small percent like 8 percent you are able to make that ROI. So if you were to give someone kind of a checklist before they buy, you mentioned make sure you have your health care attorney, help you, make sure

you have that in office operating room. Understand the percentage of patients that are going to stay. But like you mentioned, maybe they already have that connection with their previous provider. And so what advice would you have for physicians that have purchased a new practice that are trying to make that new connection with these patients and become their new provider?

Dr. Kaplan: [00:05:43] Well, I mean, I think what the previous doctor did for me, which I appreciated, is that you had an open house to try to introduce him to his patients. And the other thing is that he was only there there was only a transition of four and a half months. And so that was pretty short. So most people would probably argue and I would agree with them, that if the doctor says longer, if they stay for a year during that transition, then you would probably be able to connect with more patients and have more patients stick with you.

Dr. Kaplan: [00:06:11] But that's a double edged sword, because if you have that doctor stay longer than that doctor is going to probably start to think, oh, I like having this junior associate. That's a really great camaraderie. And they're taking all the complicated cases. They're taking a call and then they may never leave. So the other bit advice I would say is that even though you think you want to stay for really long time, maybe you don't, but make sure that within the contract of how long they're going to stay and that they have to leave at that point because they can't just stick around.

Kelley Knott: [00:06:40] Yeah, that's such good advice for sure.

Dr. Kaplan: [00:06:43] And But it was funny because the guy was a really nice guy that I bought from. But it was funny. When I first started, I was thinking before I started, I was thinking, oh, it's for an hour, but I really wish he'd stay for a year. And then the first day I was like, OK, you can go now, but not because he's a bad guy, but just because I was like was like, this is what I want.

Dr. Kaplan: [00:07:01] I want to I want to do things my way. I want to like switch to electronic medical record, all those. And so it should have been a really good experience. You see, he left when he said he would. And he was honest about the practice, the way he did evaluation. This is another good advice.

Dr. Kaplan: [00:07:16] The way he valued the practice was instead of like trying to make this huge nest egg retirement plan, he took the amount of patients that spent money on injectables during the last year, last full year of the practice. He figured injectable patients were the ones most likely to come back to see me. And he took the net revenue from injectables and that is a two times multiple. That's how we can hit one hundred ninety one thousand dollars figure. And so I was really honest him to like say, OK, my surgical patients probably aren't coming, Geus, I'm not going to jack up the price or the evaluation based on that. So that was good. But the other beneficial part was also that he had no aesthetic quivira with leases and things like that. So that made a lot less complicated. So I didn't have to worry about taking over a bunch of leases other than just the rent on the on the on office space.

Kelley Knott: [00:08:05] Oh, that's a good point, too, especially when you talked about kind of going into that in office operating room to make sure you don't have a lot of that overhead.

Kelley Knott: [00:08:13] So what was kind of for you the biggest part of the transition? Once you are already in the existing physician had kind of stepped away at this point after that three month mark that you kind of felt like you were getting into your groove and able to make your own path doing this like what was so different than before.

Dr. Kaplan: [00:08:36] Well, I mean, I think one of the things it was kind of a little overwhelming at first before I could get into my group was realizing that I had moved from a city of as I moved from a whole city to an office built from Baton Rouge, Louisiana, to an office building in San Francisco, both of which had the same number of plastic surgeons.

Dr. Kaplan: [00:08:52] So the city of Baton Rouge had the same number of plastic surgeons as the building that I moved into. That was pretty overwhelming. So I knew from the beginning I was going to have to separate myself and I was thinking, oh, great, the operator in battle separate me from the other guy, the building blocks. I quickly realized that two other doctors in the building had their own operating room too, so that wasn't much of a marketing edge. And I didn't want to purchase a bunch of aesthetic machines because it's just a bunch of mortgages to buy, kind of running on a treadmill, trying to pay the mortgage on each of those machines. So there's an industrial bunch of

lasers and things like that. That's the thing that really kind of separated me right off the bat was kind of the same thing that separates me from most doctors in the health care space is that I was open about my pricing information and they are so excited that already started a company about that.

Dr. Kaplan: [00:09:39] There's a price transparency in health care. And so the consumer was able to go to my website and check my prices, but only after they put in their contact information. So they get an automated estimate for whatever procedure they were considering, but only after they put in the contact information.

Dr. Kaplan: [00:09:53] So each time they submitted what we call the wish list, they would get an automated email with the breakdown of the prices. So they didn't have to wait for us to get back in touch with them. But we also got the same email with all their names of all the contact information, main email, just phone number city-state taking turkey. So we right off the bat, we're able to kind of like, you know, have this care about pricing. Nobody wants to talk about the prices. Sure, they can find out because US average or something. But but that's not really actionable as far as how much that doctor chooses. So they got the pricing information that we got a lead out with that really kind of. That was the beginning of really separating us from the competition and helping us build such a huge, you know, database that we have now for our marketing.

Kelley Knott: [00:10:33] That's such a good point. I think any physicians out there listening. That is such a great idea. Not only is he kind of improving and answering those questions for patients and just putting that pricing visibility, but that's how you stay in front of patients, because I'm sure, you know, as a surgeon, maybe sometimes it's just informational and they're not ready to make a decision right then. But maybe in a few months they'll be a little bit more ready. And you can use that information to capture. Like you said, through that lead magnet of getting their e-mail first, being completely transparent about some pricing and then maybe staying in front of them with an email marketing or social media marketing. That's really, really smart.

Dr. Kaplan: [00:11:12] And barters, unfortunately, whenever you're talking about price restraints, they immediately say, well, I don't want to compete on price and I'll wait for someone who says I have to compete on price. I didn't say you had to be the lowest.

Dr. Kaplan: [00:11:22] I mean, you can be the most expensive. The point is you're just using that to get them and your sales funnel so that they can meet and see the price. Sure. But then you have the contact information. You can follow up with them and explain to the baby why you're the most expensive. But you're my best of those are the best. The best. So it's really interesting. I'm actually writing a blog post on right now about why is it that price transparency automatically means you have to compete on price, but that doesn't that's not necessarily a kneejerk trigger that you've got to lower your price. It doesn't have to be a race to the bottom. You're just using that to get them to get them to provide their contact measure. In my opinion, I know how much some cost is a much better way of getting my contact information than, say, you know, download our e-book or something. Right. So they can read that information over. It's just it's just a great call to action, but it doesn't have to mean that you have to be the chips to down. In fact, you don't want to be the cheapest you want to be either in the middle or at the top of the pack.

Kelley Knott: [00:12:16] Absolutely. And and even those patients that could be price shopping, like you said, it's not about being the lowest price. It's just about being really transparent. You can even filter through those patients. They're not going to become patients of yours anyways if they think your pricing is too high. So you might as well get it out and get in front of them. And kind of, like you said, nurture the campaign of why you are pricing where you are and why you're the specialists in your field. And that way they can start thinking and seeing kind of who you are as a surgeon. And you have that information for any time you run any marketing campaigns or you want to deliver types of material they may find interesting. So I think that's something a lot of physicians can kind of lose out in in marketing is staying in front of the leads that you've graphed with these great email sequences and social media campaigns.

Dr. Kaplan: [00:13:03] One of the things you pointed out, though, I thought, was that it's simply a way to look at it as that, you know, get that information out there at the beginning, because, you know, I think because why bring them in for a consultation? A lot of doctors offer free consultations. I happen to not be one of them. We make people pay for the consultation, but a lot of people will provide a free consultation to get this person in there.

Dr. Kaplan: [00:13:23] And you go through this whole 45 minute free consultation always for them to find out at the end that they can't afford it. So it's just like, I mean, why waste your time and their time? And it's just it's much more efficient. And it's just it's a better way, I think, to go through your practice, because I think some doctors think that, oh, well, if I could just get them in, that I can convince them that that they need to choose me. Well, I don't care how charming you are, if they don't have the money, if they can't get the financing, then it's not going anywhere. I'm sorry to say.

Kelley Knott: [00:13:52] I think that's great advice. And I do work with plastic surgeons. And I think that's actually a better way to kind of view it, because you're right, we do offer these free consultations, but then maybe the patient is only at a hard, fast stop and, you know, 5000 for a rhinoplasty. And, you know, you may be you're a little bit more expensive. And then at that point, you've already invested your time. You brought them in. You kind of do that price transparency upfront. And then the ones that you said pay for that consultation are probably more likely to convert into a patient because they already know your pricing. They've been following you now at this point because you've retouched and have more touch points with them and now they're ready to even pay to meet with you. So it sounds like you're kind of increasing not only leads, Dr. Kaplan, but you're finding higher quality conversions. Is that true?

Dr. Kaplan: [00:14:37] Yeah, we actually published a study on this that the whole process that we started, we did a study where there was a was published in a peer reviewed journal where we found that over the course of a year, of all the people that submitted a wish list to check pricing with us, 17.8% of them came in for a consultation. And then of that seventeen point eight percent, 62% of them booked the procedure. And then what we did is we compared the people that came in that were price aware and book to surgery versus people that came in that were not price aware and book an operation. So if we if you look at that, people, you know, they all book. But, you know, if they came in price aware, vs not price aware you found that price or where patients were 42 percent more likely to book a procedure, Then non-price aware patients say it makes sense, it's just nobody believes it to publish it in the study. But basically, if you're getting people that don't experience sticker shock at the end of the consultation, they're more likely to book. It makes perfect sense, but now we have a number to attend to.

Kelley Knott: [00:15:33] Forty two percent is a huge number as far as conversions go. That is pretty incredible. Do you think, well, you mentioned that this was a publication. So I want to make sure that everyone listening knows where they can find this and kind of check that out. Where can they find that?

Dr. Kaplan: [00:15:50] Yeah, we we paid the extra fee so that it could be open source and like you wouldn't have to have a subscription, but it's in the annals of plastic surgery. This applies to all people, all doctors, all professions who provide outpatient services, whether someone has a high deductible health plan or whether it's cosmetic. Everybody paying out of pocket a little bit.

Dr. Kaplan: [00:16:09] But as you can, part of the annals of plastic surgery, all people would have to Google is price transparency in the online age that really roll off the tongue but doesn't make the title it.

Dr. Kaplan: [00:16:19] And it it is open source. I'm telling you, if they Google pressure insurance and the online age, they'll find that annals of plastic surgery, you'll have to pay a fee to read about it. And you know, my last name is going to be American. So it's it's actually pretty easy to find some.

Kelley Knott: [00:16:31] The first thing that comes up that is such a great advice. And what about patients? If they're already getting this pricing like you have so transparent for them to see, is it possible that they're even kind of evil maybe to purchase ad or book that appointment. Is that something you can do, pricing?

Dr. Kaplan: [00:16:51] Yeah, no, it is. It's like such a natural next step. If you can check pricing, then why couldn't they have made like they like the price? Why couldn't they buy it now? We don't do this for like a breast dog or a tummy type because we really do mind that we give them an estimate for those things, but we really do need to see them for those things. But for non-surgical services, so many patients are sophisticated enough to know how many units of Botox they've gotten or fillers they've gotten. So, yeah, after they check the price, they can actually add the item to their cart to go buy it.

Dr. Kaplan: [00:17:20] And what's funny is just like Amazon, let's say they add the item to their cart, they have to just even add it to the cart. They have to log in or create an

account. And if they buy it, great. We take care of the merchant services with a price estimate on their website. But if they don't buy it, just like Amazon, if you leave something in your cart, you don't buy it. Fifteen minutes out, So they automatically get an email and abandoned cart e-mail saying, hey, you left that botox in your cart. Click here to come back and buy it. And even if they don't go back and buy it, that's okay, because that's still because they had to log in to add it to their cart. Email is also sent to the doctor's ostrow office for the office staff to follow up. But so so they are just checking pricing. You get a lead out of it. If they're adding it to their cart but not buying it, you still get a lead out of it. So it's really great lead generation and it's going to go ahead.

Kelley Knott: [00:18:10] I know. It's just so cool. I know so many physicians that use fillers and stuff to help reach their patients. But the fact that they're able to kind of purchase it online even as a patient, that's so easy.

Dr. Kaplan: [00:18:21] Yeah, we have we have over 250 doctors that use the platform. They have a process, Demetre, and they're embedded into their website. That's really easy. They just kind of upload all the procedures they want to highlight on their website. Then we send our web developer one line of code. They embedded into the website and the consumers can check pricing purchase, although basically you can turn your website into e-commerce site form, overbuy, that is. And then the other thing we've done is we've gotten away from just like running specials and things like that. Now, what we do is we have like memberships and packages and so. So a consumer can purchase like a membership and get access to additional discounts, you know, as long as they're paying for like a monthly fee. And so the process, Demetre, can automatically make those recurring charges to the consumer on behalf of the doctors. So we've we really incorporated any kind of anything associated with price or purchasing. We've incorporated into a process, man on my website and of course, other doctors who have so to use the same type of process. It's been really great to be able to make it so much easier for the doctor, because now they don't have to develop the whole thing on their own. They can just like plug and play. It's so much easier for them.

Kelley Knott: [00:19:27] Oh. I can't believe you offer this. So you absolutely a physician listening today. Is it just a static space or is it for any kind of model that you go to that non-surgical purchase like weight loss mirror? That's exactly right.

Dr. Kaplan: [00:19:44] We have bariatric surgeons who are using the platform, you know, showcasing the pricing for bariatric surgery. But also they can sell bariatric supplements and things, rehab service centers that also do like radiology tests. And so people can purchase those things along, because even though these are medically necessary services that I'm referring to, people still have high deductible health. And so they're still paying out of pocket before their insurance even comes and even though it's not considered a cosmetic procedure. So, yeah, we've got dentists, plastic surgeons, dermatologist, primary care physicians, bariatric surgery surgeons. I'm sure everybody use this because everybody's paying a portion of it out of pocket. They want to know how much they going to have to pay.

Kelley Knott: [00:20:20] Oh, that's great. So physicians listening. So now, not only can you have these purchases go through the website, but he's even using utilizing it to create a new membership type platform, because what I know we all run those specials out there and this is a really great way. Am I right to create kind of more consistency as far as payments go through every single month and getting in front of the right taper patient and being able to sell it right there on the spot? That's pretty incredible.

Dr. Kaplan: [00:20:44] Exactly, because I feel like when you're running specials all the time and sort of in a way cheapens your jubran. So they have a lot more subtle way of running a special by having it like a little bit of a commitment from the consumer to join with the package or a membership. And then they feel better about it too, because they're dead also like they have to wait for that special day to come in that they can. They always have access to it. But in a way that makes makes the brand still feel full and in top notch.

Kelley Knott: [00:21:11] Oh, that's great. And I'll make sure for everyone listening that we have this in our show notes how you can connect with Dr. Kaplan about using this for your practice and helping you during this price transparency and how it can help you increase sales and maybe even help you develop that membership platform that he's discussing. Well, I think you also brought up a really good point. I'm going to have to bring this up.

Kelley Knott: [00:21:35] So I have to admit, I have worked with surgeons that are really, let's say, aware or nervous about competition. And you mentioned you went from

what you thought was a lot of competition to huge competition in San Francisco, even in the same building. And then you talked about price transparency. Do you think sometimes physicians are afraid to give that price transparency because of a competitor pricing their services the same? Or do you think it's honestly they just feel like they have to low bid like you mentioned before?

Dr. Kaplan: [00:22:06] Yeah, no, no. I think that's absolutely one of the concerns the doctors have. But I don't think it's a reasonable one. And I'll explain why. I think that whether you have pricing information on your website and whether, you know, people can check the price in that way or not. I think that other doctors, their offices are still going to call around and they're going to ask, do you find all a A? Oh, how much is this going to pose as a patient, as a secret shopper? So the way I look at it is that they're doing this already. There are everybody else's prices up.

Dr. Kaplan: [00:22:36] So you can either have them go to your website and check it in an automated way or you can have them calling your office and wasting your front office office staff's time asking those questions and keeping them on their pretense of two minutes talking about all the pricing. So I'd much rather let they see what they want to check pricing. They can check pricing on our website. But the thing is interesting, as they say, they have to put in a real e-mail address because if they put in a fake in August, the first leave goes to their inbox. So it's a fake e-mail. They're never going to get that that e-mail. So so they still have to put in a really mail. They still going to be on our e-mail newsletter. They're going to still feel like they're keeping up with the Joneses and all that stuff. Right. So, I mean, I just think you're going to drive yourself crazy if you're worrying about your competition. Just need to worry about yourself and keep making your own practice better. And then it's just a much easier way to live and you're less worried about everybody else doing what they're doing.

Kelley Knott: [00:23:26] I Couldn't agree more. That is so refreshing to hear. I'm with you on that. Um, price transparency, even with my marketing agency and the courses that I provide online. You can find all that information online because I just feel like if they want to know, they're going to figure it out anyaways. You might as well have your pricing out there. And like you said, it's not about low bidding. It's just about getting in front of them, capturing the right information.

Dr. Kaplan: [00:23:50] Right. And so it's not. And that is the reason we don't just like listed as a menu, because then of course, we wouldn't generate leads out of it. So that's really the that's kind of the key is like at least you're giving something. Pricing information and getting something that contact information in the process.

Kelley Knott: [00:24:06] Absolutely. So what would you say in San Francisco with your practice that you have found the most rewarding and making the switch and transition that you think would help other providers knowing that they can get to it on the other side?

Dr. Kaplan: [00:24:22] Yeah, I think that is maybe not so much. Just deal specifically with San Francisco. But I think was just the timing with when I moved here when social media was really taking off and not Facebook or Twitter, but I'm talking about like, you know, like Instagram and Snapchat. And then that's really what kind of been really transformative for us is that, you know, we were willing to put all of our or at least get our patients were willing to have their operations broadcast on Snapchat, Instagram stories. So that's really been kind of another defining or separating defining moment for us is that we rebroadcasts like probably over 95 percent of the operations we do on such an Instagram story. So we consumers find us to suit social media. They get a better idea of what the operation is. They can ask questions through Instagram and Snapchat while we're doing the operation. So there's a lot more transparency in that way, too, from the surgical perspective, much more education. And so that didn't necessarily have to do with me just doing the services. It was just the timing was about the same. Well, I didn't know that. I mean, one other benefit of having your own operating room was that you got to get permission from the administrator of the service center to just to record things. But that is I think those are conversations that doctors are going to have to start having with the administrators in the service center or the hospital to get permission to record patients, because it really is. I mean, how you can save so much money on digital marketing now upside just in social media. You really can capture so many more people in other patients that come in are so much more educated. They know the right questions asked and they've been watching me do it for months or a year, whereas that can't be replaced by just one 45 minute consultation. It's the first time they've ever seen. They've been following you for a while there. They're much more the one and much more after like booking operation, but they're much more likely to trust you to much and engage.

[00:26:13] So you are speaking my language Dr. Kaplan. So I have a health care marketing agency and we don't really provide social media marketing anymore as much for physicians because I couldn't agree more. I think the value in social media marketing for physicians needs to be from the physician. It needs to be from the view point of the professional. As you're talking about Instagram, Snapchat, especially in your specialty. Having the physician record those surgeries, being the one with a bird's eye view instead of those photos, stock images. And and, you know, patients really want to get connected with their position. They want to see hear the best, they want to see, hear the pro and they want to start following you. And the way you've just kind of mastered this social media marketing and making sure that you are the biggest part of your social media is absolute gold. Because the way I see physicians do it all wrong is when you can tell someone else is posting for them, you know, and you can always tell if it's a front desk or a marketing agency that says, you know, join us today for suffering from back pain, you know, a picture that's good information. We want to see it from the specialists. We want to hear from the provider like yourself. And by the way, listeners, please check out social media. We'll make sure we have the links in this podcast and we're going to talk about those tags soon. But he has absolutely created such a great following on social media. And it's all because he is sharing what he does and what he does best.

Kelley Knott: [00:27:37] What tips do you have for physicians?

Dr. Kaplan: [00:27:40] I know people will ask and doctors say, well. Who did you hire to help you do social media? And I mean, other than like a person in our office who does a lot of the social media. But they're in our office. They're they're thinking you can hire some agency to do it. That's just not powerful work, which you're talking about, that you really need somebody on the ground floor in the office doing it because an agency doesn't have the time to day with that. That's called an employee. That's not an Agency.

Dr. Kaplan: [00:28:06] And let's just say they just can't come in for like 30 minutes, like the essence of what you're doing. And I get it from I get the doctor's perspective. You know, like, you know, I'm already running this practice I'm already an H.R. manager, I'm already the CEO already the surgeon. So it's another have to wear that. But I'm not saying you have to do it all yourself, like personally. But you got to do it all within your

office. Nobody else is going to get it. The way your own office staff get to choose their every single day.

Kelley Knott: [00:28:32] I couldn't agree more. And like you said, maybe have the team around you to help you kind of you engage as you guys are doing our surgeries. But even if you need some consulting, that's fine. But I so agree. Take back control of your social media. I think the value there is a whole lot higher. And like you said, the ROI on it. You just can't possibly have someone with you all organizing it. But it's OK to have help and support either from, you know, team members or someone in the office and knows what they're doing and can help you structure it so you can still save some time. But it does mean. Could you agree? It does take time still, even as a physician, to make sure you're capturing that content.

Dr. Kaplan: [00:29:12] Oh, yeah. No, it's a full time job, right? There is just No way. And unfortunately, it's a necessary evil. We've actually started out when we, like, start to interview or hire people we actually like. Don't tell them ahead of time. But when they show up for the interview, we're talking, you know, whatever that means, then say do something funny on social media right now and we won't necessarily post it, but we'll have them do things. On one of the first ad, she noticed breast implants in the exam room.

Dr. Kaplan: [00:29:37] So she started juggling the breast implants for social media & we liked that.

Dr. Kaplan: [00:29:44] Well, what was actually before Boomerang? That's a really good point. It might have actually been made before boomerangs.

Kelley Knott: [00:29:49] Well, now you have to do that because that's really funny. If you haven't make it very, very I haven't a lot of cosmetic anesthetic surgeons as well as other other surgeons in specialties trying to tap into that Instagram world.

Kelley Knott: [00:30:01] Besides, like you said, creating the videos and content yourself, what is something not only in value that you've gotten from your social media, but what is some advice you have for somebody that is kind of hesitant to start that

journey or feels like they won't be able to do it? That could help them kind of take that step forward like the Taliban have.

Dr. Kaplan: [00:30:20] That really follows like 20 Something thousand followers.

Kelley Knott: [00:30:22] You have a lot of followers.

Dr. Kaplan: [00:30:26] But the nice thing about that, I want to reassure people who are just starting out or don't have a ton of followers, you don't have to have one hundred thousand dollars or a million followers to get busy with it. Even with our four hour following, we really I mean, like a really large percentage of patients, we actually our single highest source of referrals comes from social media members such as Instagram.

Dr. Kaplan: [00:30:46] Yeah. So that's the biggest single source.

Dr. Kaplan: [00:30:49] So and that's with like twenty seven thousand followers or whatever it is. So so you can not have a million like it so that you can still be busy and. And so if you look at our social media, you might think, oh, I can't do all those things enough. But that's kind of the point is you don't need to do everything right off the bat. Yeah, just start by, you know, walking to work or walking in from your car, from the garage to the office and just talk about like what operation or what procedures or what injectables your doing that day. Just talk about what you're doing. It's something as simple as that. It doesn't have to be some like, you know, grand that you're that you've been planning and no scripting out or anything like that. Just literally do that. Looking Snapchat or instagram stories. Just talk about what you do your plan for the rest of the day. Maybe you're going to work out for like I would go and pick up your kids from school. You want set to show your kids. But but that's the thing is that the the followers, the viewers, they just want to know you're a real person. They want to know what you do when you're being real, when you're not necessarily being a I guess it's kind of like a reality show. You're just not nearly as interesting, as famous as like the Cardassian would even eventually to be viewed by your followers. And that's what you should do. Day one, don't overwhelm yourself. Don't say, oh, I'm going to do all these different things. Just just start with that recording yourself, talking into the camera, talking about what your plan is for the day and that that is that's where it goes from there. It builds for longevity.

Kelley Knott: [00:32:13] That's such a killer point, because what you're really talking about, too, is just get started. Don't hold back and use resources available. And I think as a surgeon, especially coming from the other side, I think it builds an authenticity. And a lot of times patients are looking for someone who they can relate to. And when they see posts like that that you're directing and being really authentic and genuine and makes a connection a lot easier as well. And if what you do professionally and how good you are, but, you know, it just makes the physician, I think, more real and that is attractive to patients looking for someone for these really high end surgeries and care that it's somebody they feel like they can actually talk to and relate to. And I think that's really great how you just said that just yet. And, you know, start filming and just use what's available. You don't need a big video equipment or the big videographers to come in every day. He took Fulvio to be authentic on social media and to be consistent.

Dr. Kaplan: [00:33:15] Amen Amen!

Kelley Knott: [00:33:20] I was going to say one thing, because we've just talked a little bit about it, but you've absolutely done such a great job with marketing your practice and reaching new patients. I want to make sure patients know a little bit more about how they can connect with you, even just to kind of see what you're doing and how maybe other physicians can connect with you just to kind of see how you're putting these things into action every single day. And if you could talk to us about where you can find your Twitter handle and your LinkedIn, is it at Doctor Real Bae?

Dr. Kaplan: [00:33:53] Real doctor get along or, you know, real Dr. Bae is my Instagram handle RCL the RBA D be a Y real doctor. X I'm in San Francisco Bay Area.

Dr. Kaplan: [00:34:03] Just to be a little more hip for the kids. Be a real doctor. Be on Instagram and such. I think the easiest way to get in touch with for sure based on just out of this diagnosis on Instagram. But yeah, we're on LinkedIn, but that's more so. So at my price transparency company built my bods. But that's the easiest way to get in touch, really. Or they can be better. Email me to a Doctor Kaplan at P-H as an advocate. P.S. Wasn't plastic surgery dot com but our Web sites real Dr. Bae dot com. But it's very easy to get in touch. There's always going to be some. I was going to answer your e-mail or against number mussing, but I didn't touch this at all. And also,

I'm actually I go I go on a lecture, did different meetings. I actually spoken to some different mentor courses or INSEAD biologic talking about just social media and how incorporated into your practice. So I've been on the speaking circuit talking about that a lot and just really trying to show everybody the breadth of what's possible on social media, but also talking about how to start small and build from there.

Kelley Knott: [00:35:05] And that is really good advice because like you said, I think some people are all in on social media, but the idea of trying to do it, I think, overwhelms them. And I thought some the tips you really gave today were were so good for physicians out there, just maybe even worried about budgeting or marketing. And I don't know what I'm doing on it and just being able to start. Like you said, start just filming. Just start using your phone. Don't overthink it. And even something that I think a lot of physicians will really take away from today is how invested you are in knowing your numbers to Dr. Kaplan. We talked about making those big decisions. And it sounds like you really put a process in place when making these decisions to make sure you had all the data and information you needed to get where you wanted to be. As a practice owner.

Dr. Kaplan: [00:35:50] Correct. I mean, nobody nobody believes anything, Antiguan, the number associated with it. And that's why all these studies out there that make all the difference. It's like I feel like I'm a little bit more credibility because I have gone to the patient charts and the convergence and you know, how much people stand. And so I can actually produce a number that's you know, that's a legitimate number. People are like, OK, that's something I can hang my hat on because I mean, just even back to that eight point sixty six percent of patients that stuck with me after I took over the practice. You know, nobody really knew those numbers before. People would say, oh, yeah, 20 percent of the patients stick around. I felt like 20 percent of this magic number of people use when they don't really know the answer. Just kind of guessing .

Kelley Knott: [00:36:30] 20 percent.

Dr. Kaplan: [00:36:32] Yeah, 50 percent sounds too high, 10 percent sounds too low. So I just choose 20 percent. But I like that. It's just. I don't think it's I think it's just like dogmatic reflex.

Dr. Kaplan: [00:36:41] It was. Yes, 20 percent. You hear it all the time. And so. So I think it's just important to get those numbers out there, mostly to make people feel better, like, you know. So if you only had 9 percent or 10 percent of the people stick with you. You took over prices. Well, by now, you know, you shouldn't feel bad that that's actually really good. And again, it's not really the percentage of patients that stay with you. It's how much of those it's quality over quantity when it comes. So that's why those numbers are important. That's what people need to know. That's why I need to do a legitimate, you know, run-through of all your data and publish that so other people demand from.

Kelley Knott: [00:37:21] Such Courtenay's and for everyone listening, if you are a patient or a provider, you can find Dr. Jonathan Kaplan. He gave you some of his information about his e-mail. But I will make sure I have all the links not only to a social media, to his site, to his practice and anything else we discuss in this podcast. Make sure you connect with him. He absolutely knows what he's doing when it comes to marketing and most importantly, as a physician. And we so appreciate you coming on today. And I wanted to just end it with what would be your biggest advice for anyone listening today?

Dr. Kaplan: [00:37:55] Biggest advice for anybody listening today is, I guess I'm kind of already suggesting that the get started. You've got to try it with social media. I'm sorry. I'm sorry to tell you that there's no way around it. Even if it's not Instagram in 10 years, it's gonna be something like that. Tick tock. You just gotta start. You gotta start. Tick tock. Exactly. I've just started using. Tick tock. That's it.

Dr. Kaplan: [00:38:16] Tick tock is like an amazing platform. It's so entertaining. It's not really know so much. So for like I don't really have my like surgical procedures on there, except that it's not the same kind of educational platform. It's really nice to be an entertaining platformers and clever, clever tricks of the camera and just being funny or people dancing in front of which I'm not doing.

Kelley Knott: [00:38:37] Draw the line in some way.

Dr. Kaplan: [00:38:38] Exactly, I have to draw the line. But it is still a good way to engage with millennials who are eventually as the generation who are eventually gonna

be your patients. So there's no reason to not get on. Tick tock. But again, if you've got to start somewhere. Of the Instagram stories and go from there.

Kelley Knott: [00:38:54] Absolutely will. Thank you again so much for joining. And please don't forget to connect with Dr. Kaplin and let me know if you have any questions from today's podcast. I'll make sure we get them over to Dr. Caplin and his team. So thank you again.

Dr. Kaplan: [00:39:09] My pleasure. Thanks for having me.

Kelley Knott: [00:39:11] Thank you for listening. Today's the latest episode of the Patient Convert podcast. Don't forget to subscribe and review on your favourite podcast platform. We're on Apple, i-Tunes, Google Stitcher and Spotify. Or you can sign up to receive the latest episode via email. Just check it out on my agency website or my personal website. And if you are looking for more amazing health care marketing information or just to engage, check us out at Intrepy dot com. And for any of my amazing physician liaison out there interested in growing their physician referrals are learning the strategies that it takes to build highly engaged physician referral networks. Check out my web site kelley knott dot com where I have free webinars, free downloads and of course my online physician liaison training course physician liese on university. And as always, I'm a huge believer in connecting, engaging and supporting one another. And the best way we can do that is networking. And I always, always connect with you guys on social media and one of my biggest social media platforms is Linked-In. So feel free to connect with me there on LinkedIn or Instagram or Twitter at Kelly not. And thank you guys again for listening to the patient convert podcast with your host kelley knott.

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Thanks for listening. Kelley Knott

