

Ep #27: Creating Your Brand with Korey Korfiatis



Full Episode Transcript

With Your Host

Allison Watts, DDS

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Welcome to *Practicing with the Masters* for dentists with your host, Dr. Allison Watts. Allison believes that there are four pillars for a successful, fulfilling dental practice: clear leadership, sound business principles, well-developed communication skills, and clinical excellence. Allison enjoys helping dentists and teams excel in all of these areas. Each episode she brings you an inspiring conversation with another leading expert. If you desire to learn and grow and in the process take your practice to the next level, then this is the show for you. Now, here's your host, Dr. Allison Watts.

Allison: Welcome to *Practicing with the Masters* podcast. I'm your host, Allison Watts, and I'm dedicated to bringing you masters in the field of dentistry, leadership, and practice management to help you have a more fulfilling and successful practice and life.

Korey is a new friend of mine that I was introduced to through Mark Battiatto who's now my official practice consultant. As co-founder and CEO of Legwork Software and president of Okeefe Korfiatis Consulting Group, Korey has worked for over a decade strategizing, designing, and promoting award-winning brands for dental practices across the nation.

Today, Korey is recognized for his writing, speaking, and courses on various dental marketing subjects. Korey has spent much of his career intensely researching dental consumer behavior and communication techniques that inspire purchasing decisions and brand-loyal patients.

Korey brings a unique, real world, no smoke and mirrors approach to branding and new media tips and techniques. His presentations are based on foundational industry facts applied to case studies and enhanced by storytelling to help anchor the reasoning behind the research and motivate his audience to take action in their own marketing.

As we were getting ready for this call, we were discussing how it might seem weird to people that we're talking about marketing

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but I think it's a huge piece of leadership and I know Korey is going to get into that too. But if we as leaders of our practice, if we're not the people who decide what our brands going to be and what we stand for and what we can do for people, who's going to do that?

So I know Korey is going to help us understand a little bit more about that tonight. I'm so excited to have you here, Korey. I feel like we're so on the same page. I'm really excited to have you here. I appreciate it. Whenever you're ready, you can start. I'll just ask questions. If any of you guys have questions, Korey said he'd be happy for you to interrupt if you have a question.

Korey: Absolutely. Thank you, Allison, for having me. I'm flattered to be with you guys today and I will try to make this as interesting as we can. To begin, I think it's important that as Allison alluded to we have to understand that to run your business means of course that directly aligns with leadership.

To run your business means that you have to understand what your unique value proposition is. All decisions that you make need to be stemming from or that needs to be the platform from which you make those decisions. Your value proposition is what makes you unique. It's what patients can relate to from an experience perspective and it's really what helps you stand apart in the marketplace that you serve.

Allison: Can you define that for us? Unique value proposition?

Korey: Absolutely, the simplest way to define the value proposition is to think of it from the perspective of who you are and obviously that is as simple as the practice name. But it's also who you are from the patient's perspective. So for example, your practice name is, if it's not the same as your name as the lead practitioner, the lead dentist, then that presents potential challenges and also potential strengths with regard to your communications.

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So for example, we know that we're nine times more likely as a society to communicate the name of our practitioner as opposed to their dental practice name because in service-based marketing, we're not necessarily communicating the practice name. Because it doesn't have the brand strength that the dentist does with their patients. So who you are over or who are you asking that question, is really relating to the name that you want to present yourself as in the marketplace. Then understanding what those challenges are with regard to that communication.

The next is, what do you do? What do you do, obviously at the top level, the 30,000-foot level, you do dentistry. You provide dentistry but it goes much beyond that as you start to drill down that question and start to dissect it and sort of peel back the layers of the onion, if you will, and think about what is it that you do that makes you unique and different. This reflects on your clinical philosophy, your practice style, your location. All those things need to be considered when you're defining that value proposition.

Lastly, what makes you different? That's probably the biggest question you want to ask yourself because to the patient, they're looking through the eyes of a lens that is much different than yours when you're looking at your practice. So they look at you unfortunately in a bit of a generic sense because they don't know the clinical background that you have. They didn't go to school to learn what you know. They don't have the detail to understand why your philosophy might be different or unique or what is special to them and why it matters to them. So that's a difficult question to answer in just a simple statement. You have to really think that through.

One of the ways to help you do that is to reflect back on what I call—well actually I didn't coin this phrase—it was from a book I read which is called *Good to Great*. It's an excellent book and

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they refer to the hedgehog principle. The hedgehog principle talks about basically reflecting on your business and asking yourselves, where's your passion? Or what is your passion? Specifically inside the world of dentistry. Is it comprehensive care? Is it treating kids? Is it treating only elderly? What is your specific passion?

Then, what are you best at? What do you do that you know you can do better than most of the other clinical practitioners that are your colleagues? Then do those two things match? In other words, sometimes what we're passionate about and what we're best at aren't always the same.

Lastly, and probably at the end of the day, most important is what makes you money? I don't mean that because money drives us. But ultimately, without money we can't run our practices. So from the hedgehog principle, we can then apply that back to defining your value proposition.

Allison: So from those three things you're saying that helps you pick what you're going to be known for? How you're going to put yourself out there? That makes sense. Yeah, okay.

Korey: Yeah. Another way to think of it is ask yourself who you lined up—I use this is my speaking a lot—I say, “Okay, let's have seven docs in the room stand up please.” Then of course we pick out seven docs or ten docs or whatever it is. Then we ask ourselves, okay, if I was a patient and I had never met any of the people standing up, how would I differentiate one over the other?

You might go through the exercise of, okay well lets hold up your college degrees and where you live and you know some of your history. All that stuff starts forming impressions in the mind of the patient. But ultimately, it really doesn't tell the patient if one practitioner is better than another, one dentist is better than

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the other. Ultimately, no one really knows that except peers working with peers, who's the best dentist.

Ultimately, perception is what drives the decision for the patient and that perception is built based on how you tell that patient or that consumer what your value proposition is. What makes you different? How you're different. You have to remove the clinical from that process because we know that patients are making decisions primarily based on experience because they don't have the educational background or information to make a decision based on clinical information.

Allison: I was just thinking, what about alluding to or stating something about the quality of care, you know just excellence? Or I know you can't say like "the highest quality" but you know what I mean? Like obviously that's speaking about clinical, but you're saying just don't use clinical, like talk about crowns or whatever, right?

Korey: Well, yes and no. I mean obviously there's a blend of—in sales we call it features versus benefits selling. It's like you sell the features because you need to know what the product is delivering. But you ultimately need to sell the benefits of those features and that's what tips the customer over. It's, what am I going to get from those features?

That's hard to apply to dentistry because the outcome is better health, more appeal, more confidence, etc. So you want to angle the conversation or the content around the benefit to the patient and less about the feature. In this case, we're talking about an implant or a crown, etc. Those things are all generic in the perspective of the patient. They don't know how to differentiate one crown over another and they don't know how to just differentiate the word excellence, for example, because it's kind of a generic term.

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Allison: So I guess like maybe what? Long lasting or something that keeps them from having to come back to the dentist more?

Korey: Yes, think about the benefit.

Allison: That's more of a benefit. Okay.

Korey: Yeah, so, okay that's a great example. So let's say, forgive me, because again I learned my background based on what the patient thinks, not necessarily what the clinical terminology is. We'll use the products that are typically used in dentistry, an example. If your materials that you use are superior, well that's fine but I don't know how to differentiate that they're superior or not and I would hope they're superior. If you deliver excellent dentistry, well gosh, that's what I expect because I don't want to go to the second-best dentist.

So, as opposed to worrying about telling me your specific credentials, and some of that is important, don't get me wrong. Focus on the products that we use will help you ultimately have a longer lasting smile or provide you a more natural looking smile and bring you back to what God gave you, or what have you. You know, something that is delivering the benefit and not so much focused on the clinical or technical aspects.

So if you are relating those two, so you're saying, the feature is the products or the material that we're using and the benefit is longer lasting, natural, bringing you back to a youthful smile that you once had, or whatever. Painting pictures in the mind of the consumer is how we like to look at that.

Another exercise you can use to help you with those decisions is think about what we call the genie in the bottle theory when you're writing your communication. So if you're trying to paint pictures in the mind, in the consumer's mind, with your communication one of the best ways to do that is to think about what words am I using? If I rub the proverbial lamp or genie

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bottle and the genie comes out, what genie am I going to see as opposed to everyone else who is my market, who is my audience?

The example, if you use the word genie, some of us who have children might see *Aladdin* and some of us who might have grown up with Barbara Eden or whatever her name was might be thinking of her as the genie. So that's an example of how you define your messaging and have it be consistent. By thinking about, what does the consumer picture? And how can you make that as consistent as possible across the board? Does that help define that?

Allison: Yeah, I was just thinking, so when you're talking about your messaging, that is not just advertising. You're talking about like how we talk to the patients when they're in our office and like what is that, so how do we use this messaging? So we figure out what our—who we are—right?

Korey: Value proposition.

Allison: Yeah, what our value proposition is. Then what do we do with it?

Korey: Well I'm glad you asked. Let me talk about that.

Allison: I mean, I think I know because I've taken courses. I think I know some of this, but I will bet just from our previous conversation, and my conversation with Mark, that you're doing some pretty cool stuff that we're not doing and that I've never even thought about doing. So I really do want to hear about that. I'm excited on a selfish level. I'm guessing that the people on the call want to hear about it too. So yeah, I do, I want to know what we do with it. What you recommend we do with it.

Korey: All right, well I'll try to—this is a very complex question, I'm going to try and keep it as simple as I can. Not because I don't want to insult anyone's intelligence but there's just a lot of

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moving puzzle pieces and I want to make sure that I describe it correctly. So the first thing that you want to think about is the channels of communication. After you've developed your value proposition, in other words, you've developed your message and you know what you stand for and you've defined that. Which we could talk for two hours just on that alone, but we'll move to the next step.

The next thing that you'll want to do is think about the channels. Now the channels of communication are, all they are is a vessel or a method to which you get your message out. So you can talk about search engine marketing, you can talk about referral marketing, and traditional advertising like newspapers, and radio, and television and all those things. There's a million channels to choose from.

So a lot of the times I watch dentists just kind of get their eyes all crossed when they try to figure out, well how do I build a strategy? Then the most frustrating thing about that is most of the time they get taken advantage of by, not necessary by knowingly people taking advantage of them, but they sell them on this search engine optimization program and that internal marketing program and then another vendor is working on their website.

Before long, the whole purpose for developing a value proposition goes out the window because you've got ten people controlling your brand communication. Let alone the fact that you may or may not have even trained your team yet on how to communicate the brand through culture, and phone scripting, and in-person communications, and all of that. So channels of communication need to be broken down and understood and then they need to be worked from there.

So I'm going to give you the key channels that I believe are most important and they're very simple. One is internal. 90

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percent of my clients are benefiting greatly and returning about three dollars to every one dollar they're spending, or more, most of them more than that on internal marketing alone. People do not realize the low hanging fruit or the power of just working your own client, your own patient list. So number one is internal marketing.

The second channel is search marketing, but not from the sense that you might be used to hearing about it. Everybody talks about the buzzword search engine optimization. Everybody wants to know how that works. Well, it's very simple. Only Google and God know how it works. So there's no reason to ask anyone who says they're an expert about search engine optimization to tell you, because first of all they're not an expert.

The only people who seriously know how it works are the people who are building the algorithms themselves. If you've ever read and researched it you'll find out quickly that it's so complex that none of us will ever fully understand it and it's changing all the time. So there is no such thing as a search engine optimization company in my opinion. I think they sell snake oil.

Now there are two options within the search realm though. There's organic search, or indirect search, and that's if someone types in like, "whitening Seattle," or "whitening Bellevue Washington." Then there's direct search which is, "Doctor Allison Watts" and "Bellevue Washington," or wherever the location is that they're at. That is, the direct search realm is very simple to maximize or optimize. I could go into an hour of discussion on that but that's the simple one.

The indirect is the one that is very, very difficult because of the competition and the algorithms and how Google functions. So to spend money on the indirect channel is wasteful. You want to keep your direct channels in scope and in focus. So search

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marketing is number two. I wish I could go into that but it would take me too long to go into the details, maybe we could have another call another time specifically on those.

Social marketing is the third channel. It's different from search marketing because social marketing is in a network in and of itself. So I'll use Facebook as a quick example. Facebook, if you have a friend in the business, in this case you have a fan not a friend, but you have a fan on Facebook who likes your business page. Then he or she who likes your page, if you can get them to comment, or like, to share, you're of course virally spreading the communication to their like-minded friends and family.

Well what a great opportunity for new referrals if you know how to work that social channel. The thing that people don't realize nowadays is that there's more search and more traffic going on inside of Facebook than even on Google. There's more traffic, more movement going on inside of Facebook than on Google. I mean, think about that. That's a heck of a lot of communication going on. So maximizing that communication is critical to your marketing strategy and to communicating that channel, through that channel.

Fourth is community. The community channel has various subsets. It can be event, participation, sponsorships, even down to local newspaper advertising if you're in a rural community. I don't suggest that in a big city because it's too expensive, but smaller rural communities, you can even do some of the smaller community papers and get benefit from that.

But here's where the fifth channel comes in and this is the proverbial magic bullet that people forget or don't even realize, is that all of those communication channels mean absolutely nothing if you cannot track them, track the results, and convert

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interested leads into patients. So if I were to ask your listeners and I'll just ask you for the sake of conversation, Allison. If you have any marketing going on do you have any idea, and be honest because you might already have an idea but how would track your marketing currently?

Allison: Well, I honestly don't think we do that very well. But we do ask patients on the phone. But we do find it very interesting because sometimes they'll say on the phone, they'll say, "Well I found you on the internet." Or they'll say something and then when they come in in person they'll—when they expand on it a little bit, it's not actually—you know like they used to say they found me in the phonebook but really somebody told them about me or they saw me in the newspaper a year ago and then they had to look me up in the phonebook. So I do find that very challenging. I know there's ways on websites and stuff to track it but yeah, I'd like to hear more about that.

Korey: Okay.

Allison: Maybe not tonight, I know you can only touch on things briefly. But yeah, that's hard to know because we spend a lot of money on all the different channels and we really don't know what's really working.

Korey: Yeah, this is the frustration that I'm trying to solve. I have a very strong passion for trying to solve this for the industry because you've got the two things I've mentioned so far, one is everybody has got something to sell you, which I understand. Everybody is in business to make money but no one is providing you a strategy. So you end up buying all these misconstrued puzzle of marketing and communications which only devalues your value proposition.

So what we do is we take, it doesn't really matter what your communication channels are ultimately and it doesn't really matter what your value proposition ultimately is if you can't

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track it. Because it might be the best value proposition in the world or it might be the worst one but you don't know until you can track it. So we developed, and this is not a sales pitch, this is purely just the way we do it philosophically.

We have built a software that has allowed us to connect all of the communications that are going on in your strategy and through the channels that we suggest. It connects the users to the software and allows us to track both new leads coming from various communication messaging. It allows us to help convert those leads through communication follow up that's automated and scheduled. Then it helps us to nurture referrals to generate increased referral flow, which is as we alluded to earlier in the call is the lowest cost, highest return on your marketing investment is through referrals.

So our company, Legwork, is what it's called, it isn't the only software in the world that does this. It just so happens to be, it just happens to be the only one that we're aware of in the dental industry specifically. So we created communications for the dental industry. But regardless, you need a method to funnel all of your communication into.

So let me give you an example of how that would work in a more realistic, real life sense. Let's say you have a Facebook account and let's say you get 10 or 15, 20 friends and family and then it kind of stalls out, which most of them do because you're not sure kind of how to get beyond that. Well the next thing you need to do is figure out, how do I get as many patients as I can on that tool? Because once I get them on that tool then I have the ability to communicate to them virtually free and if I can get them to interact with me, I'm spreading my message to their friends and family and that's a natural referral source.

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So how am I going to do that? Well the first thing we want to do is we want to run a fun contest or something interesting that drives them to your Facebook account. You have to give them a reason to go there. Usually it doesn't have anything to do with dentistry because, no offense to the listeners, but dentistry isn't that sexy of a reason to go a Facebook page.

Allison: What?

[Laughter]

Korey: Unless I have a need for your service, I'd rather buy an iPod or spend the money in those areas. So we've got to track them where they are, offering a widget or something cool. Widget, I mean a piece of technology, something cool that you can give away. Once we get users to that account we ask them to write a recommendation in exchange for entering the contest. So by writing a recommendation they're talking to their friends about you the minute they get to the page. Then when they've liked the page and we also ask for email to be able to enter the contest.

So it serves three purposes: it gets fans to your page so you can market to them in the future, it gains their email account so that you can nurture them to an appointment and communicate to them about and educate them about services you offer, and it generates recommendations for search for search ranking authority, and that's just a fancy word for being higher on Google and being higher inside of Facebook algorithms as well.

Now all of that then funnels back. The way we do it is all of that communication that we've tracked funnels back into the Legwork software and then after they've entered the contest we follow up with them through email communication, text messaging communication, and printed communication. Say, "Thanks for entering the contest." Let's say for example it's fall, "By the way don't forget your insurance benefits are going to

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run out at the end of the year. Schedule your appointment today, book online. Here's how you schedule."

So you follow that, you close that loop of your marketing, instead of running the standard ad that goes out in a coupon or goes out in the newspaper and may or may not come back to you. There is no method to track it. You may or may not get anyone's attention, you never know if it works or not. So everything is tying back to the software. Does that make sense?

Allison: Yeah. Are you saying that no matter what channel we use it can tie back to the software? Or does it just have to be the electronic stuff?

Korey: Well it's in your message is how you tie it back. So it doesn't have to be the electronic stuff but it's how you drive your consumer or your patient to the communication that matters.

Allison: I'm a little familiar with all the internet stuff just because I'm into all that stuff so I know that people create like a Facebook ad or they create different ads and then they evaluate to see how that ad does. So they get people, you know, how many click-throughs or whatever, right?

Korey: Yes, so go back...

Allison: So are you saying we create different ads and then you track it based on the different ads?

Korey: That's the first level of tracking, yes. But the ads don't have to be external in nature. So a Facebook ad would be an external ad. Meaning, it requires someone who's not a patient to make a decision to click your ad, to come into your world so to speak. Or a newspaper ad is an external, it's what we call an external or outbound piece of communication. Meaning you're interrupting someone and trying to get them to come to you.

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Allison: Yes.

Korey: That's one method. That's trackable but it doesn't matter what the channel is. So try not to narrow it down just to a Facebook ad or a pay-per-click ad on Google. It's any communication needs to tie back to the software.

So let me give you another example that's offline so you can understand what I'm trying to say. Let's say you have a printed flyer, it can be just a simple flyer. You send a nice looking individual who is happy and has a smiling face out to some of the local businesses that you want to network with. That flyer has basic information about your practice and says go to either a Facebook page or a website page, it doesn't matter, anything online to either request or receive information on how to take care of yourself in the event you lose a tooth or crack a tooth.

So you have a pre-setup campaign that says I'm going to provide my user or my target with information that's valuable to them. I'm not going to sell them anything, I'm just going to provide them a resource, like what to do in the event of a lost tooth or a tooth getting knocked out. So you hand out the flyer, you introduce yourself, and they go to that page and fill out the form to receive the document, the communication, that's explaining how to handle a situation like that.

Then on that document it says, "By the way, we have a tooth saver kit at our office that is a solution you can use in the event that you knock out a tooth. So we can save that tooth in the hopes to re-implant it before it is no longer viable. Come on by and get your free tooth saver kit." So then you get them to your office. All of this time, all of this communication is called opt-in or elective communication. It's all trackable because you're utilizing data to capture the information and you're utilizing automation to continue the communication flow. Does that make sense?

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Allison: Totally, yeah that's kind of what I was talking about. But I was wondering how that applies to like internal referrals or you know that kind—or, okay let's say we don't have your software.

Korey: Mm-hmm.

Allison: Right, because...

Korey: Shame on you. I'm just kidding.

Allison: I know. Holy cow, obviously we need to run out and get it. But right now I don't have your software.

Korey: I'm just kidding, totally kidding.

Allison: But you know so, okay, I have some printed things that go out in a welcome. Anyway, we pay these people, they go to new people who move into town and they drop off these nice little gift baskets. They have one dentist, and one family physician, and one hairdresser, and one whatever. They have a little basket, right.

The only way right now I'm able to track that is if the patient says when they call that, "I got your name from a welcome home basket." So we were just presented with the opportunity to renew my six-month agreement with them and I asked Lisa, "Has anybody said that they came from there?" And she said, "No." I said, "Okay, I'll give it six more months and if we don't have one patient," because it's not very expensive.

Korey: Sure.

Allison: But if we don't have one patient say they came from there then I'm probably not going to renew. But if you're saying that they could get, so in that welcome home thing we could put something, we could make something about it trackable.

Korey: Absolutely. And I would argue that you're measuring the communication channel.

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Allison: Yeah.

Korey: In effect, not necessary giving it its due credit for a couple reasons. One is you just gave a new person who came into the community the opportunity to learn about you first. They may not have a need for your service right at this moment. You as a dentist, and again I'm just brainstorming here, I'm not trying to direct this comment at you.

But you as a dentist assume that we as patients have a direct need for your service and that we even think that a year has gone by and oh my god we're late for our hygiene appointment. That's not the way we think. You have to tell us to come in, you have to remind us, because we're lazy as a society and we need a reason.

Allison: Well and we're busy you know too, yeah.

Korey: Yeah. Also the general population thinks that dentist are always never taking new patients because they're only open four days a week, and they take vacations two or three times a year. Now I realize you're going to advanced courses, you have to have an administrative day. All of those things I understand as a person in the industry that you're working your tail off. But from the perception of the patient, you're busy. You don't have time for me, so why should I run to your office?

So let's take that analysis and do it a little bit differently with or without Legwork. First thing I would do is say, "What can I offer the patient that isn't selling them anything but provides them a lot of value?" Well instead of putting a flier in that kit maybe you—and I'm just brainstorming here—but maybe you, we'll go down the tooth saver example. You can buy those little tooth savers for fairly inexpensive. So you buy 25 of those and I think they're, I don't know \$12 or \$13. You can get them through your supply vendor.

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Get 25 or so of those and you say, “You’re new to the community, we want to welcome you. We have a gift for you at our office that will help you in the event that you’re out doing” whatever recreation. Maybe you tie it to a specific recreation in your community. Like in our case, we have a lot of mountain biking.

You communicate it specifically to that consumer and talk to them in a way that they’ll be excited. For example, “We know you’re new in town. We know part of the reason you decided to live here is because of the great,” and then fill in the line. In this case maybe it is mountain biking, “because of the great mountain biking and hiking we have available. To protect your great smile we have a free tooth saver kit for you. Stop by our office and grab it so you can protect your smile,” or whatever it is.

So you are giving them a reason to come visit. You’re giving them something that is of value to them and you have a better method of tracking it than, “Call us when you have a need for our services.” Then you’re expecting that ad to be trackable and you haven’t given them a call to action. You haven’t given them a reason to instantly come back even with an offer because an offer is you’re only tracking the offer, you’re not tracking necessarily the value of the ad.

Allison: Right.

Korey: Does that make sense?

Allison: Yeah, and that’s kind of what I was asking. So when I first said, yeah, it gets complicated actually to sort of talk about in an hour and I don’t want to make it too complicated. So if we use a channel of, is it always tied to some kind of gift or do you ever have like, I don’t know, a little code or a scanner thing or something that’s like, do you know what I’m saying?

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Is it always tracked to something where you're asking them to, oh gosh, yeah, there's always a call to action and you know by the call to action or is there something on the advertising piece that you can track? That's what I'm trying to ask.

Korey: Yeah, well there's multiple ways to track but the unfortunate part about marketing is unless you are getting them to a digital form, something that they have to input, or you've got a phone tracking number, or you've got an item that they must pick up etc. You know, all of those are tracking mechanisms but let's talk about the benefit of impressions, which is the other side of marketing that people often forget. I'm not trying to take us off that subject but again we could talk an hour just on tracking alone.

So we have to consider the value of impressions with marketing in a service-based business because again, I'm not suggesting you offer a discount necessarily, I'm suggesting that you offer a reason to act. That means that they won't always act but there's value in having exposure, brand exposure, to a targeted audience. In the new mover type program, there's no more targeted audience than that. They certainly don't have a dentist yet.

Again, they may see your little new mover kit saying that you provide—no matter what it says—and if it's relatively decently designed and worth looking at, enough even for seconds, you've created a first brand impression. So that impression has value. Because once again, I'm building brand value with patients and consumers through repetitive communication. That's why you can't rely on one channel. You have to have multiple channels working in tandem with each other.

So that new move in person, maybe it works like this and you don't even know it. They get the move in kit, they glance at your ad, they throw it away. But you formed an impression even on

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the very minor level. Two weeks later, they go golfing with their new buddy they just met at work and they go, “Gosh you know I still haven’t found a dentist, who do you go to?”

“Oh I go to Allison. She’s incredible you’ve got to go there.”

“Okay, thanks.”

Two weeks later, because again, I’m a consumer, I don’t have time to just jump on, I go to your website. I find you on the web hopefully because you’re optimized in direct search. I click your contact form or I call your number and then they say, “How did you hear about us?”

“Well I was referred by Joe.”

“Okay, well then great.”

Joe gets credit for the referral but the new move in kit gets zero credibility even though it was part of the process of forming the brand impression. So impressions are just as valuable in a lot of ways as actual conversions because they all contribute together. They all work together in tandem. Does that make sense?

Allison: Yeah, so I guess then what I’m trying to figure out, can you track impressions or does it even matter? You’re just tracking the end...

Korey: The only... sorry go ahead.

Allison: No, you’re just tracking the end thing I guess? I don’t know what to call it, the end source?

Korey: Well you’re tracking impressions in the sense that the new mover kit program has to cost something in exchange for an amount of new mover kits going out. I’m calling them “new mover kits” because I don’t know what they’re called, but getting it to all the new residences. So let’s say they, you

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should know or they should tell you, we'll just make up a number, we delivered ten this month. Okay, well that's ten impressions you've made.

You don't know if they ever actually picked up your piece of communication unless they act on it, which is why the messaging is half the battle. But you do you know that you got ten of them out. Now if you have ten of them out there and you can track that two of them responded or converted and that cost was, we'll just make up a number, that cost was \$200 to reach those ten people and two of them converted, and that value in my mind would absolutely be worth the cost to acquire those two patients.

Allison: Yeah.

Korey: Because we know patients, average patient value per year is about \$750, minimum. So that's a no-brainer. But is two patients going to grow your practice? No, not very quickly. So if we've got to have another channel, doing a similar approach, fully trackable, so now maybe you're spending \$400 on another program, or \$400 total, spending another \$200 over here in another program. We're reaching 20 patients, making 20 impressions, targeted impressions, and we're getting three patients on average from this program.

Okay, well now we're spending \$400 but we're getting five patients. All right, we're stilling making money, good. Now let's do it again. So we've got six, seven, eight, channels. Good communications, all consistent, telling the story, all trackable, as best we can to measure the result. Then most importantly is we have to have a mechanism for follow up because again, it's not one impression that necessary generates the result. So that's where the automation can be helpful.

Allison: Okay, I want you to talk a little bit about your software. But if we weren't using your software, what would the steps be that we

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could do? Like if we were going to go back to our office tomorrow and do something different? What would we do? What would make an impact that we could do in our—like is it just getting really clear on your message and then communicating it to your team and your patients? Is that like, or do you have like some steps that we could do?

Korey: Yeah, I'll give you three steps that you can do. One, understand who you are, what you do, and why it matters to your patients. That requires sitting down and thinking it through. But let's face it—okay that may be too complicated. Let's bypass that one for now, give you something simpler.

So audit your marketing. Just by simply looking at what messaging is going out in what forms today. Okay, I've got a website, I've got a local little newspaper ad I do, I sponsor the little soccer team in the fall, and I have a Facebook page. Okay, great, so we've got some marketing channels. Now how am I tracking the results on those channels? Probably not much. I hope that people are seeing these but I don't have a clue how to measure them.

Okay, so choose three things that you can provide that are what we call relational in nature, not necessarily selling anything. I'll use the tooth saver kits just to make the conversation simple. We'll use the little tooth saver solution kit or maybe one more, let's say you write out a nice simple guide on the differences between off-the-shelf whitening and in-office whitening and give comparisons and contrasts. Okay, so just some piece of data that can help your patients or your consumer to see you as a credible expert.

Then you find a simple mechanism to get that item well-placed at the sports event. Maybe you go to one of the events that you sponsor and actually hand out the kits, or hand out the white paper to the parents. You place, design a page on your website

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that says, “Have you ever looked or ever been interested in knowing the differences between off-the-shelf whitening and professional whitening? Go here to our website.” Or you know, “Here’s the form you fill out and click the button and give me your email and we’ll send you that information.” That can be done by any basic webmaster. It’s not a difficult thing to do.

Then maybe you’ve got your local community advertisement in the newspaper. Same thing, offer that same offer, driving it back to the website page so they have to fill out the form. Then post a couple times a week on Facebook, driving them to that website form. Give that information out to educate patients about that specific service offering.

Then of course on those documents that you give out you have a mechanism for follow-up or a call to action. Which is, come in for a no obligation free whitening, or free no obligation whitening consult, or something to drive them back. That doesn’t require, that doesn’t have any digital tracking per se but at least it gives you a very simple close-looped mechanism for saying, “Okay all my channels that I’m using are working together with one cohesive message that I can track because if my whitening services go up then I know that I’m making an impact. If my whitening services don’t go up, then I need to change my message or I need to change my channels.”

Allison: Oh, are you saying focus all your marketing channels on one message for some period of time?

Korey: Well, you said give you something simple you can go do when you go back to your office tomorrow.

Allison: Yeah, yeah, that’s awesome. So are you saying, for me to take the whitening, for example, are you saying my unique value proposition is not whitening, but this is a particular campaign, right?

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Korey: Yes.

Allison: And I would have the whitening carry through all of my channels and then—I mean carry all these steps that you're saying through with just the whitening. Then I would do it again with another, like sleep apnea? Or you know whatever something, right? Could be grinding, crunching and grinding.

Korey: If you've got technology like CEREC or something that you know, tooth in a day kind of program, but you use all your channels to push that campaign consistently over a period of time, because again, we're busy as people. You tell me all sorts of different communication messages and I'm going to wash over it all.

Allison: I like that.

Korey: It's got to hit me repetitively.

Allison: So how do you know when to stop talking about that subject?

Korey: You ever seen a GEICO ad?

Allison: Yeah, I've seen lots of GEICO ads. I like the cavemen but you know whatever, they went to the pigs flying, I don't understand.

Korey: Do you have GEICO?

Allison: I don't.

Korey: Do you have a need for changing your insurance provider?

Allison: Umm, I don't think so, not right now but if I did I would probably consider GEICO, yeah.

Korey: You may or may not, but the point is do you think they're going to stop their advertising to you because you haven't made a decision yet or even if you have made a decision? No. They're never going to stop, if it's working for them and they're tracking it and they've got a good strategic plan and a formula.

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Allison: Okay.

Korey: They'll never stop it.

Allison: So we're marketing what we're offering. Okay, well that's cool. So we're picking something and we're marketing for a specific period of time. But you don't want to market like six things at one time do you?

Korey: Not unless you've got the budget, which even the biggest of dental practices that I work with rarely have that kind of budget to have that kind of a strategic plan in mind where you're moving through multiple channels. What we do is we do what's called an editorial calendar. We say, "Okay we know the times of the year that patients are most likely to be thinking about certain things," like whitening is pretty obvious.

It's like, okay, in the fall when they're getting married or in the spring when the sun is coming out. Okay, so that's not rocket science. So you run your campaign for whitening during that time of the season. Then you schedule, pick four, don't try to over complicate it especially if you are new to figuring out your value proposition and your strategy for marketing. Because you also have to realize you've got a team to train. They've got to know what's going on so they can help support the campaign. We haven't even touched on the other components.

So break it out by quarter. Pick four topics that you really want to focus on that tie back to your value proposition. What you're passionate about, what you can make money at, and what you can be the best at. Then run those campaigns based on, it all ties back to budget and timing and frequency, which we said gets a little complicated. But basically set your budget, track your result, and then monitor from there and decide. You can always increase.

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Allison: Cool, okay so are you saying, when I think of my unique value proposition it's pretty, it's been pretty consistent. I've been in practice almost 20 years.

Korey: Yep.

Allison: I know who I am, I know what I do, I know what I am good at, my team is pretty clear who we are. But is that what my unique value proposition is or are you saying, then the campaigns are like underneath that? We're always speaking our unique value proposition but we're speaking it about the whitening, we're speaking about the—or are you saying that our unique value proposition changes? That is the thing that we choose four times a year?

Korey: Your unique value proposition is something that you stand behind without compromise.

Allison: Okay.

Korey: So you said you know who you are. You have been doing this for a long time. You know what your values are. So I'm going to ask you a tough question. Let's go through the exercise.

So I'm riding up an elevator with you and I say to you and we were buddies in college, and I say, "Hey Allison, how are you? What are you up to?" How are you going to answer that question?

Allison: You did put me on the spot. Dang it. Why did I act so cocky? No, well I'm practicing dentistry. My favorite thing is to do things that change people's lives. I really enjoy seeing people who have problems with their smile or health problems with their mouth and helping them change their life, change the way they look, change the way they feel. Stuff like that, really significant. I like doing significant dentistry that people walk out and they're like, "Yeah, you changed my life." So yeah, I don't really know what I would say but that's what I like to do.

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Korey: That's your elevator pitch, right?

Allison: Yeah, but I don't really have—I could develop one if you gave me more time.

Korey: No, I mean so that's a good basic elevator pitch. It's like, okay I want to change people's lives through dentistry and I do that in various ways. I tailor my dentistry services based on some key things that my patients need. First, we look at their health. Second, we look at their wants or their desires. Third, we look at their financial situation.

One is we really want to take care of their health first, second is we want to help them with their desires, and then third we put a budget in place to make that happen. So there's your elevator pitch, changing people's lives, doing it this way.

Now the question is, can every one of your team members communicate that value proposition in virtually the same way? I'm not saying they can't but I'm just asking that question because that—and then does your website communicate? Let's go to your website. What's your website address?

Allison: Oh my gosh, I don't know if my website does or not. Just go to www.AllisonWatts.com.

Korey: Okay.

Allison: AllisonWattsDDS.com.

Korey: DDS.com

Allison: I think it does actually. I know my story is in there about...

Korey: "We love changing smiles and lives. It's our greatest reward."

Allison: There you go.

Korey: "We are passionate about providing comprehensive..." See? So you've already created some consistency there.

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Allison: Woo-hoo.

Korey: “Thank you for visiting our website. If you are looking for an experienced, highly-trained cosmetic and fine restorative dentist, it’s our pleasure and privilege to invite you to choose our office as your new dental home.” That’s very well written.

“Dr. Watts combines the keen eye and gifted hands of an artist,” this is one of the best websites I’ve read, quite honestly because you’re focusing on what? Your skill as it relates to providing an outcome to the patient. But you started it with your value proposition. Now if you’re not doing things in the office beyond clinical, I understand you’re doing it clinically because that’s what you love to do and that’s your passion.

But look around the office, look around your communications, and look at every aspect and ask yourself, can we, are we, how are we changing smiles and lives every single day? Not just through dentistry clinically, but the experience in the office. And how can we move that communication from just our personal passion out into telling our story through these channels we’ve talked about?

So every piece of communication, weather it’s on whitening or on restorative dentistry, or any of these things. Even though whitening ads should say we start with, “We love changing smiles and lives. It’s our greatest reward here at Allison Watts DDS,” or however you say your name, your practice name. “Therefore we’ve created a whitening program that will” blah, blah, blah. So you start that proposition with every aspect of your communication. That’s what I was saying and you’re actually doing it and not giving yourself credit for it because you got nervous when I asked you that question.

Allison: I did get nervous. Then I got really nervous because you said you wanted to look at my website. I was like, “Oh no, I hope it’s

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on there.” Anyway, I do have a question. There’s somebody with their hand raised. Are we good to answer a question?

Korey: Yeah, sure.

Allison: Okay, now it’s open.

Kate: Now it’s a little delayed. My answer was [makes laughing noise] because I heard you go on the spot so I was making fun of you. But that one is delayed now. But I did want to mention to the speaker that I am in Renton, just outside Bellevue, hello.

Korey: Hello.

Kate: As side job as a hygienist, I’ve got like three different things going on. One is a cutting-edge collaborative practice that I’m trying to get into the hospitals with and then synergy effect out to local dentists. But I wanted to see if after we’re all done if you could mail me some of your business cards because I’m going to be going out and doing lunch and learns to various offices and I run into a lot of dentist struggling with this. And I’m really into social media and most of them don’t even still use it. So I just thought you know as a way I’d love to hand out your cards for anybody struggling.

Korey: Thank you very much. I’d love to align with you and help you as well. We’re in it together. We’re all trying to—I mean, my personal passion is to, as I kind of alluded to in the call, to help dentist better understand their value propositions and tell their stories in a unique way. Because I believe the more that we can as dentists and practitioners, and well I’m not a dentist, but in the industry, tell the story in a unique way, the less reliant the patients will be on insurance and they will start to more understand the value of what we’re providing them. That’s my passion.

I think dentists get scared and fearful about where they’re going with regard to the changes in the insurance industry and so

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forth and all the other challenges. They're missing the big picture which is, and this relates back to the leadership component of this which is, why this marketing component directs right back to leadership. Which is, drive your business through understanding your value proposition and communicate it well. So I would love to talk to you. I'm assuming that you have direct contact with Allison, so maybe we can share emails together and connect up and I'll come visit you.

Kate: Okay, and I already went to your website because I was looking at it while you guys were talking. What I can do too is just contact you on a different day and then give you my mailing address. Because I would, there are several doctors I actually know that are struggling. But you know when you try to pitch to them about somebody, you know that they're used to hearing so many marketing sales pitches that they're really not interested.

Korey: They've been soured by it.

Kate: They have. And I like your kind of no BS attitude about it. I don't know, I just thought at least maybe I could conjure up some communication because some, they're really suffering. At least I can mention that I had Allison's class and you're local. I didn't even know you were local until you, I knew by you saying Seattle, the Seattle map, so I looked you up. But anyway, I'll call you a different day, but I just wanted to let you know that because I would love to help them through you because they're just really suffering.

Korey: Well, thank you. I hope that means you're getting some value from this call because that's always the goal. So love to collaborate with you in the future. My email by the way is just Korey@LegWorkPRM, which stands for patient relationship marketing.com. Korey@legworkprm.com. So contact me anytime.

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Kate: Thank you.

Allison: Thanks, Kate. So Korey, I think we can close just because I want to be respectful of everybody's time.

Korey: Yeah.

Allison: There was something when she was talking that popped in my head that I wanted to say. Oh, I think it was just, do you think most dentist know the value of what they do and believe in the value of what they do? Do you help dentists figure out—is your value proposition sort of an exercise that you do? That is, I think it could be either/or but like figuring out your vision, your mission going through your values, your goals? I love that kind of stuff.

I don't even want to call it strategic planning but is it an exercise that you do with them? Or do you really sit and help them feel like in their heart the value of what they do for people? Because I think that is part of the challenge that maybe Kate is speaking to, is not only do we, I mean we don't have the time to be doing all of this ourselves, that we don't really understand it or whatever. But I think a lot of us don't even really understand how valuable what we do is to people.

Korey: Yeah.

Allison: Does that make sense?

Korey: Yeah, and I think the short answer is there's a little bit of a crossover between branding and your business and understanding your business proposition and then the interpersonal leadership and coaching, which I think falls a little more into Mark's category and the Growth into Greatness. Because that's why his alignment with me, and me with him, has been so beneficial. Because you know I love that part, but quite frankly, there's a place where it becomes, it's a little bit out of my expertise level.

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I think the brand camp is the closest thing that I come to as far as understanding who you are from a marketing perspective. But then there's the whole like personal goal side and understanding your business from a numbers perspective. And there's that whole piece that really falls I think more into Mark's category than mine. But I think together that's why we started to work together well because we both see that.

Ultimately, that's our goal, is to help dentists find what it is they're so passionate—or you know reinvigorate their passion for what they do and help them remember it. Then more my side is how to get patients to see that. So I can help a little bit but Mark crosses over there a little bit.

Allison: Okay, that makes sense. Yeah, yeah, that was very clearly answered. Okay, well I know we need to end here but I have, I feel like I have still questions, so I will get in touch with you.

If any of you guys have specific questions for Korey, please he's given his email out, so he's obviously saying he's willing.

Thanks for listening to *Practicing with the Masters* for dentists, with your host, Dr. Allison Watts. For more about how Allison Watts and Transformational Practices can help you create a successful and fulfilling practice and life, visit transformationalpractices.com.