

AGENCY CREATIVE

Multi-Site Healthcare

De Novo Launch Playbook

Building the Marketing Infrastructure That Makes Every New Location Open Strong

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90 Days

Pre-opening lead time
required

158%

Booking volume increase
(DSO)

\$519 →

\$96

CAC reduction per
booking (DSO)

**Launch
Week**

De Novos hit pre-opening
targets

THE PROBLEM

De Novo Launch Failures

The marketing window is the bottleneck.

When a location opens without pre-built demand, it doesn't just start slowly. It opens with an empty appointment calendar and misses early EBITDA targets. The critical window (the 90 days before launch) is where first-month performance is determined.

Blame is usually misassigned.

When a location underperforms, the investigation focuses on operations: staffing, scheduling, capacity. It's the absence of a patient acquisition pipeline seeded before opening day.

No digital presence before opening

Marketing begins at opening, not 90 days prior

No pre-registration or pre-booking mechanism

Missing conversion infrastructure (landing pages, call tracking)

No attribution infrastructure

No retention sequence for first-visit patients

“Every PE sponsor has a location that launched in 10 months and one that took 22. The difference is almost never the market. It is whether anyone built the patient pipeline before opening day.”

Scott Schindele, Vice President Client Services, Agency Creative

The 90-Day Pre-Opening Launch Framework

| 1 90 Days Out Weeks 1-4 | 2 60 Days Out Weeks 5-8 | 3 30 Days Out Weeks 9-12 | 4 Opening Day + Months 2-3 |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <ul style="list-style-type: none">• Claim & optimize Google Business Profile• Build location-specific web page with local SEO• Establish social media channels• Launch Out-of-Home advertising in trade area | <ul style="list-style-type: none">• Launch hyper-local digital advertising (Google, Meta, Programmatic)• Activate CTV & Radio advertising• Deploy pre-registration offers• Begin email/SMS nurture sequences | <ul style="list-style-type: none">• Shift to conversion: optimize landing pages for direct booking• Test all booking infrastructure• Refine offer messaging from Weeks 5-8 data• Pre-seed review strategy | <ul style="list-style-type: none">• Elevate paid search to capture all local intent• Launch reappointment campaigns for first-visit patients• Analyze channel performance & reallocate toward top performers• Deploy feedback and review sequences |
| <p><i>First-mover digital authority before competitors intercept</i></p> | <p><i>Committed appointment holders before location opens</i></p> | <p><i>Location opens with a partially filled calendar</i></p> | <p><i>First-mover advantage fully activated; launch momentum sustained</i></p> |

The Launch Infrastructure Stack

Five non-negotiable components for consistent performance across a multi-site portfolio

1

Attribution Infrastructure

The Foundation

Before the first campaign dollar is spent: call tracking, conversion tracking, UTM parameters, and dashboard reporting must be configured. Attribution is not a reporting amenity. It is a capital allocation prerequisite.

2

Conversion Infrastructure

Capturing Demand Efficiently

A conversion-optimized landing page, online booking functionality, call tracking, and offer sequencing. Demand is generated and immediately lost - the equivalent of a pipeline with no valve.

3

Multi-Channel Media

OOH · CTV · Radio · Search · Social · SEO · Email · SMS · Direct Mail

Coordinated multi-channel media consistently outperforms single-channel approaches, driving higher conversion rates and compounding patient acquisition efficiency.

4

Local SEO & First-Mover Authority

Compounds Throughout the Ramp Period

Google Business Profile optimization, citation building, and location-specific content must begin 90 days before opening. Every week of early establishment translates to measurable ranking advantage.

5

Standardized Playbook

Not Location-Specific Reinvention

When a platform has a location that launched and ramped in 10 months, that launch (timing, channels, offers, conversion infrastructure) becomes the template for every subsequent opening.

CLIENT CASE STUDY

A DSO with 161 Locations

The De Novo Challenge

The existing approach was reactive. Marketing began at or shortly before opening, with no pre-opening demand generation or conversion infrastructure. Locations opened with thin appointment calendars and consistently underperformed their ramp models.

The Solution

Agency Creative built a centralized strategy with localized execution, designed to function as a capital allocation engine. A unified attribution model connected media spend to appointments and contribution margin. We deployed a coordinated multi-channel mix and a repeatable de novo playbook combining pre-opening demand generation, hyper-local targeting, and conversion-focused experiences.

158%

Monthly booking
volume increase

82%

CAC reduction
(\$519 → \$96 per booking)

11,035

Total patient bookings
in first six months

**Launch
Week**

De Novos hit
pre-opening targets

“De Novo location launches consistently exceeded pre-opening booking targets. Select markets reached full launch-week volume within weeks of opening.” — DSO Marketing Leadership

CLIENT CASE STUDY

A Vision Network with Multiple Brands and 500+ Locations

The Strategy

This network operated 500+ locations under 125 independent brands across 200+ markets. Marketing varied widely by location and performance lacked comparability. Agency Creative built a portfolio-level operating model to increase revenue density across existing locations while preserving brand independence. Rather than standardizing creative, we unified how performance was measured and optimized, introducing cross-market visibility into revenue per patient, conversion behavior, and location-level EBITDA contribution.

Results

- Same-site performance improved through stronger revenue per patient and better service mix alignment
- Underperforming locations more easily identified, enabling targeted action to improve revenue density

\$63.24

Optimized blended
portfolio CPA

28%

CPA reduction via
location optimization

147%

Higher conversion vs.
single-channel campaigns

31%

Higher on-site conversion
vs. search alone

Predictable, forecastable demand that PE sponsors price at a premium

SELF-ASSESSMENT

De Novo Launch Audit: CMO Self-Assessment

TIMING & PLANNING

- Pre-opening marketing begins 90 days before opening day
- Documented, standardized launch playbook applied consistently
- De novo launch budget approved before 90-day window opens
- Week-by-week launch calendar with clear ownership

DIGITAL PRESENCE

- Google Business Profile claimed & optimized 90+ days out
- Location-specific web page live with SEO before ads launch
- Social media channels established before launch campaigns
- Review generation strategy in place for first 30 days

CONVERSION INFRASTRUCTURE

- Conversion-optimized landing page (not generic homepage)
- Online appointment booking functional & tested pre-launch
- Call tracking connected to specific campaigns/channels

ATTRIBUTION & MEASUREMENT

- Attribution infrastructure configured before first spend
- Location-level reporting tracking against ramp benchmarks
- Marketing spend connected to scheduled appointments
- Ramp performance reported to operating partners financially

PATIENT RETENTION

- Reappointment campaign for first-visit patients
- Feedback & review request sequence after first visit
- Ongoing patient communication for first 90 post-opening days

Any gap identified is a controllable cause of launch underperformance and a quantifiable EBITDA risk.

Building the Business Case for De Novo Launch Investment

The Conversation That Changes the Budget

Here is the question every operating partner eventually asks: what is the cost of a slow launch, and what would it have taken to prevent it? The math is straightforward. Calculate the monthly EBITDA shortfall, multiply by recovery months, multiply by annual new locations, and compare that to the pre-opening marketing investment.

CMOs who can answer it, with data showing that locations running the full pre-opening program consistently open strong while those without it consistently do not, have made an unambiguous business case for launch marketing investment in every future location opening.

The De Novo Launch Investment Case

- 1 Calculate monthly EBITDA shortfall for a location that opens without a patient acquisition pipeline
- 2 Multiply by the average months to recover to modeled performance
- 3 Multiply by number of new locations opening per year
- 4 Compare total EBITDA drag to incremental pre-opening marketing investment
- 5 The launch marketing investment is a fraction of the EBITDA cost it prevents

“At our DSO client, the difference between a location that ramped in 10 months and one that took 18 came down to whether pre-opening demand generation was running 90 days out. That delta has a dollar value. Calculate it once and you never fight for launch budget again.” - Scott Schindele, Agency Creative

Built for PE-Backed Multi-Site Healthcare

Most agencies bring healthcare clients a media plan. We bring a capital allocation model. Agency Creative was built specifically for PE-backed multi-site platforms - which means our work is measured in EBITDA contribution, IRR impact, and ramp velocity, not impressions or click-through rates.

What We Build

- Pre-opening demand generation programs that fill appointment calendars before opening day
- Attribution infrastructure connecting every media dollar to location-level patient acquisition outcomes
- Standardized de novo launch playbooks: your best launch becomes every launch
- Multi-channel media across OOH (90 days), CTV & Radio (60 days), Search, Social, Programmatic, SEO, Email, SMS, Direct Mail
- Location-level performance reporting in the financial language operating partners require

What We Deliver

- Locations that open with patient pipelines already built, not empty appointment calendars
- Reduced blended CAC across the portfolio, with measurable improvement in cost per acquisition and revenue per patient
- Consistent new location performance that hits or exceeds investment thesis ramp models
- Repeatable, scalable launch systems that improve capital efficiency as the portfolio grows
- The attribution data to report launch performance to PE sponsors in EBITDA terms

Ready to build your De Novo launch system?

Let's walk through your next location opening and build the launch program together.

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The Playbook at a Glance

1

The Problem

Slow ramps are a launch infrastructure failure. The IRR cost is measurable and preventable.

2

90-Day Framework

Marketing must begin 90 days before opening. By opening day, the window has already closed.

3

Infrastructure Stack

Attribution → Conversion → Multi-Channel → Local SEO → Standardized Playbook.

4

Proven Results

DSO: 158% booking increase, 82% CAC reduction.
Vision Network: \$63.24 blended CPA.

5

The Business Case

The marketing investment is a fraction of the IRR drag it eliminates. The math is unambiguous.