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The 2027 Therapy Practice Marketing Plan Workbook

A working plan for reaching the clients you do your best work with, filling open hours and keeping your marketing inside your ethics code. Fill it in with every clinician who has a caseload to build, then review it each quarter.

PREPARED FOR

PLAN PERIOD

QUICK START

How to use this workbook

This workbook is the working companion to our therapy practice marketing plan guide at trymaas.com/blog. Read the guide once for context, then fill in one section per week. Every box in this PDF is a form field: type straight into it in Acrobat, Preview or your browser, then save.

THE THIRTEEN SECTIONS

1. Business snapshot
2. SWOT analysis
3. Customer personas
4. Competitive analysis
5. Brand positioning
6. Goals and KPIs
7. Customer journey map
8. Channel strategy
9. Content strategy and calendar
10. Budget, stack and measurement
11. 12-month plan
12. Common mistakes
13. Quick start

> **Time budget.** Most sections take 30 to 60 minutes. Do them in order: positioning (section 5) only holds up once the snapshot, SWOT, personas and competitor work are done.

NEED HELP?

If you would rather have a team build and run this plan with you, MaaS by CodeSM is an outsourced marketing team for mental health private practices and group practices: therapists, counselors, social workers and psychologists. Book a call at **trymaas.com/get-a-demo**.

SECTION 1 · WHERE YOU ARE TODAY

Business snapshot

One page that anyone on your team, or any partner you hire, can read in two minutes.

BUSINESS NAME

LOCATIONS / SERVICE AREA

CORE SERVICES OR PRODUCTS

AVERAGE SALE OR CUSTOMER VALUE

TOP THREE CURRENT SOURCES OF CUSTOMERS

REVENUE GOAL FOR THE YEAR

CURRENT MONTHLY MARKETING BUDGET

WHO OWNS MARKETING TODAY

WHAT MAKES CUSTOMERS CHOOSE US OVER THE ALTERNATIVES?

WHAT HAS WORKED IN MARKETING SO FAR, AND WHAT HASN'T?

SECTION 2 · HONEST INTERNAL AUDIT

SWOT analysis

Strengths and weaknesses are about you. Opportunities and threats are about your market. Every weakness is a message you should not lead with; every opportunity is a campaign you haven't run yet.

STRENGTHS

What do you offer that few nearby practices do? Think a clear niche, specific training (EMDR, ERP, Gottman, perinatal), evening availability, bilingual clinicians, strong referral relationships.

WEAKNESSES

Where do prospective clients choose someone else? Generic website copy, slow inquiry response, new clinicians with thin profiles, no Google presence, unclear fees or insurance information.

OPPORTUNITIES

What demand is going unmet? Underserved populations (perinatal, men, teens, specific cultural communities), schools and employers looking for partners, telehealth across your licensed state, physicians with no one to refer to.

THREATS

What could pull clients away? Venture-backed telehealth platforms outspending you on ads, payer rate cuts, clinician turnover, directory algorithm changes, new practices opening in your niche.

TOP TAKEAWAYS

THE TWO STRENGTHS WE WILL LEAN ON HARDEST IN OUR MARKETING

THE ONE WEAKNESS TO FIX BEFORE WE SCALE SPEND

SECTION 3 · CUSTOMER PERSONAS · PERSONA 1

The First-Timer

Has never been to therapy and is searching privately, often late at night.

Unsure what therapy involves, what it costs or how to choose. Needs plain language, clear fees or insurance information and a low-pressure first step such as a short consult call.

WHAT PROMPTED THEM TO LOOK

WORDS THEY SEARCH

INSURANCE OR PRIVATE PAY

PREFERRED FORMAT (IN-PERSON OR TELEHEALTH)

WHAT MAKES THEM HESITATE

FIRST STEP THAT FEELS SAFE

COULD A FIRST-TIMER UNDERSTAND WHAT HAPPENS IN A FIRST SESSION AND WHAT IT COSTS WITHIN ONE MINUTE ON OUR SITE?

HOW QUICKLY DOES THIS PERSON HEAR BACK AFTER REACHING OUT, AND FROM WHOM?

SECTION 3 · CUSTOMER PERSONAS · PERSONA 2

The Specialist Seeker

Knows what they need and is comparing training and credentials.

Looking for a specific approach or population: an EMDR-trained trauma therapist, an OCD specialist, a couples therapist, a perinatal specialist. Reads specialty pages closely and will often pay privately for the right fit.

SPECIALTY OR MODALITY THEY WANT

CREDENTIALS THEY LOOK FOR

PRACTICES THEY ARE COMPARING

FEE RANGE THEY ACCEPT

FORMAT AND SCHEDULING NEEDS

PROOF OF EXPERTISE THEY NEED

DOES EACH SPECIALTY WE WANT TO GROW HAVE ITS OWN PAGE WITH THE CLINICIAN'S TRAINING NAMED?

WHY WOULD THIS PERSON CHOOSE US OVER A SPECIALIST AN HOUR AWAY OR A TELEHEALTH PLATFORM?

SECTION 3 · CUSTOMER PERSONAS · PERSONA 3

The Referred Client

Arrives with your name from a physician, psychiatrist, school, EAP or colleague.

Already half-decided because someone they trust sent them. The risk is a slow callback, a full clinician or an intake process that loses them before the first session.

REFERRAL SOURCE

REASON FOR REFERRAL

INSURANCE OR PRIVATE PAY

WHO IS MAKING CONTACT (SELF, PARENT, PARTNER)

URGENCY

HOW THE REFERRAL SOURCE LIKES TO HEAR BACK

DO WE HAVE A FAST LANE FOR REFERRED INQUIRIES, AND DO WE CLOSE THE LOOP WITH THE REFERRAL SOURCE?

WHICH REFERRAL PARTNERS SENT CLIENTS THIS QUARTER, AND WHICH HAVE GONE QUIET?

SECTION 4 · KNOW THE FIELD

Competitive analysis

List the four or five businesses your customers compare you with, including the ones that aren't really competitors but win the same budget. Fill in what you can see from the outside.

BUSINESS	SPECIALTIES CLAIMED	FEES AND INSURANCE PANELS	AVAILABILITY OR WAITLIST	DIRECTORY PRESENCE AND PROFILE QUALITY	WEBSITE CLARITY ABOUT WHO THEY HELP	TELEHEALTH, IN-PERSON AND FREE CONSULT
Us						
Competitor 1						
Competitor 2						
Competitor 3						
Competitor 4						
Competitor 5						

WHERE WE CLEARLY WIN

WHERE WE LOSE TODAY, AND WHY

SECTION 5 · ONE SENTENCE THAT DECIDES EVERYTHING

Brand positioning

Positioning is the reason a customer should pick you. Write it before you write a single ad.

For [who you serve] who [need or problem], [your business] is the [category] that [main benefit]. Unlike [main alternative], we [proof].

WORKED EXAMPLE

> *For new and expecting parents in the Denver area who feel overwhelmed and anxious, Northside Counseling Collective is the group practice that specializes in perinatal mental health, with evening telehealth and in-person sessions, because all four of our clinicians hold advanced training in perinatal mental health and see these clients every week.*

OUR POSITIONING STATEMENT

PROOF POINT 1

PROOF POINT 2

PROOF POINT 3

SHORT VERSION FOR THE WEBSITE HEADLINE

SECTION 6 · WHAT WINNING LOOKS LIKE

Goals and KPIs

Three to five SMART goals: specific, measurable, achievable, relevant, time-bound.

#	GOAL	CURRENT	TARGET	BY WHEN / OWNER
1				
2				
3				
4				
5				

Examples. Fill 18 open private-pay hours across three clinicians by June 2027. Respond to every inquiry within one business hour and offer a consult time in the first reply. Raise consult-to-intake conversion from 40% to 55% by Q3 2027. Grow active referral partners from 8 to 20 by December 2027.

MONTHLY KPI CHECK-IN

METRIC	WEEK 1	WEEK 2	WEEK 3	WEEK 4	GOAL
Inquiries by source					
Median inquiry response time					
Consult calls held					
Consult-to-intake rate					
New intakes by clinician					
Open hours by clinician					

SECTION 7 · FROM FIRST SEARCH TO REPEAT CUSTOMER

Customer journey map

Where your customer is, what they are doing, and where you meet them. Fill in the last column with what you will do at each stage.

STAGE	WHAT THE CUSTOMER DOES	WHERE WE MEET THEM	OUR ACTION
Notice	Realizes something is not right, or a friend, doctor or partner suggests therapy.	Physician and school referrals, word of mouth, educational content	
Private search	Searches alone, often late at night, for help with a specific problem.	Google, directories, AI assistants, insurer lookups	
Compare	Scans profiles, photos, specialties, fees and availability.	Psychology Today and other directories, Google Business Profile, website	
Fit and cost check	Wants to know if you treat their issue, what it costs and whether insurance applies.	Specialty pages, fees and insurance page, telehealth page	
Reach out	Sends a form, calls or emails. The most fragile step; many give up after voicemail.	HIPAA-ready contact form, phone line, booking link	
Consult call	Has a short call to check fit, fees and scheduling.	15-minute consult with a script, intake booked on the call	
Intake	Completes paperwork and consent, receives a good faith estimate if private pay.	Client portal, intake forms, confirmation and reminders	
First sessions	Decides whether they feel understood and want to continue.	Clinician, office or telehealth experience	
Ongoing care	Expects easy scheduling, clear billing and reliable reminders.	Scheduling system, billing, reminders	
Completion and referral	May recommend you to others on their own; never solicited.	Referral partner updates, community talks, word of mouth	

SECTION 8 · WHERE THE BUDGET GOES

Channel strategy

Tick the channels you will run this year and name an owner for each. Investment ranges are planning ranges; adjust to your market.

USE	CHANNEL	ROLE	CADENCE	TYPICAL INVESTMENT	OWNER
☐	**Website specialty pages**	Convert searchers and directory visitors	One page per specialty, reviewed quarterly	$3,000 to $12,000 build, then upkeep	
☐	**Psychology Today, one profile per clinician**	Directory discovery	Refresh copy and photo quarterly	$29.95/month per clinician	
☐	**Secondary directories**	Niche and specialty audiences	Quarterly check	Free to $50/month each	
☐	**Google Business Profile**	Map results for in-person offices	Monthly updates	Free + 1 hr/month	
☐	**SEO content**	Answer the questions prospective clients search	2 to 4 articles a month	$1,000 to $4,000/month	
☐	**Google search ads**	High-intent specialty searches	Always on, one campaign per specialty	$750 to $3,000/month	
☐	**Insurance panels and platforms**	In-network referrals	Keep profiles current	Admin time; lower rates	
☐	**Referral partner outreach**	Physicians, psychiatrists, schools, EAPs, colleagues	4 to 8 touches a month	Time + modest budget	
☐	**Email newsletter**	Referral partners and opted-in subscribers	Monthly	$20 to $100/month	
☐	**Social media (educational)**	Trust and visibility, not direct leads	2 to 3 posts a week	Time	
☐	**Workshops and community talks**	Visibility with schools, employers and parent groups	Quarterly	Time + venue	

SECTION 9 · CONTENT AND SOCIAL

Content framework

Plan 2 to 4 web articles or specialty pages a month, 2 to 3 educational social posts a week with short clinician videos, and one monthly email to referral partners. No client stories or testimonials.

EIGHT CONTENT CATEGORIES TO ROTATE

CATEGORY	FORMAT	FREQUENCY	EXAMPLE
1. Specialty explainers	Web page or article	2 per month	What EMDR actually looks like in a session, explained by our trauma specialist
2. What to expect	Short video or article	Monthly	What happens on a 15-minute consult call with us, and what we will ask
3. Fees and insurance	Web page + post	Quarterly update	Our 2027 fees, the panels we are on, and how superbills work
4. Clinician introductions	60-second video	1 per clinician per quarter	Meet Jordan: who she works with and why she trained in perinatal mental health
5. Self-help and education	Article or carousel	Weekly	Five signs everyday worry has become something worth talking to someone about
6. Seasonal topics	Article + email	Monthly	Back-to-school stress: what parents can watch for in the first month
7. Referral partner updates	Email	Monthly	Two clinicians with evening openings this month, and our new teen group
8. Community	Photo post or event page	Quarterly	Free talk for parents at the public library: helping anxious kids sleep

OUR THREE CONTENT PILLARS THIS YEAR

SECTION 9 · CONTENT AND SOCIAL

30-day content calendar

Plan one month ahead. Write the post idea and the channel in each day you publish.

1	2	3	4	5	6
7	8	9	10	11	12
13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

SECTION 10 · BUDGET ALLOCATION

Budget allocation

A starting split for a typical business in this industry. Write your own percentages and monthly dollars next to it.

TOTAL MONTHLY MARKETING BUDGET (AD SPEND + PEOPLE + TOOLS)

BUCKET	EXAMPLE	WHY	OUR %	MONTHLY $
Google search ads	35%	One campaign per specialty; no remarketing or Customer Match		
SEO and website content	30%	Specialty pages, fees page, articles		
Directories	5%	Psychology Today profile per clinician plus one secondary directory		
Referral outreach and community	10%	Partner visits, lunches, workshops		
Video and photography	7%	Clinician introductions and profile photos		
Email, call tracking and forms	7%	HIPAA-ready tools with BAAs		
Contingency	6%	Move to what is producing intakes		

WHAT WE WILL CUT FIRST IF RESULTS LAG, AND WHAT WE WILL ADD FIRST IF THEY BEAT TARGET

SECTION 10 · TOOLS AND MEASUREMENT

Tech stack and weekly dashboard

STACK CHECKLIST

- [ ] HIPAA-ready contact and intake forms with a signed BAA
- [ ] Ad pixels and session recording removed from forms, intake pages and client portals
- [ ] One shared intake inbox with a one-hour response standard
- [ ] Consult call script and a booking link sent in the first reply
- [ ] Psychology Today profile for each clinician, rewritten around your positioning
- [ ] Google Business Profile for each in-person office, with accurate hours and categories
- [ ] A website page for each specialty you want to grow, plus a fees and insurance page
- [ ] Good faith estimate process for clients not using insurance
- [ ] Inquiry source recorded in your EHR or CRM for every new client
- [ ] Referral partner list with contact owner and last touch date
- [ ] Review response policy that never confirms whether someone is a client
- [ ] Weekly dashboard with inquiries, consults, intakes and open hours

WEEKLY MEASUREMENT DASHBOARD

METRIC	THIS WEEK	LAST WEEK	GOAL	STATUS
Inquiries by source				
Median inquiry response time				
Consult calls held				
Consult-to-intake rate				
New intakes by clinician				
Open hours by clinician				
Cost per new intake by channel				
Referral partner touches and referrals received				

SECTION 11 · THE YEAR AT A GLANCE

12-month action plan

The order we suggest. Move rows to fit your season, add an owner, and tick each one off.

WHEN	FOCUS	OWNER	DONE
Month 1	Snapshot with open hours, personas and positioning; rewrite every clinician's directory profile		☐
Month 2	Inquiry process: shared inbox, response standard, consult script, booking link; remove pixels from forms		☐
Month 3	Specialty pages for your top three specialties plus a fees and insurance page; start referral outreach		☐
Month 4	Launch Google search ads on one specialty; start the weekly dashboard		☐
Month 5	Clinician introduction videos; Google Business Profile cleanup for in-person offices		☐
Month 6	Mid-year review: consult-to-intake rate, sources and cost per new intake; shift budget		☐
Month 7	Back-to-school content and outreach to school counselors and pediatricians		☐
Month 8	SEO articles on your top specialty questions; monthly referral partner email		☐
Month 9	Workshop or community talk; second specialty ad campaign if capacity allows		☐
Month 10	Review insurance panels and private-pay mix against caseload goals		☐
Month 11	Holiday and new-year content; check open hours for January demand		☐
Month 12	Annual review: caseloads, payer mix, sources, specialties and next year's priorities		☐

SECTION 12 · WHAT TO AVOID

Common mistakes

The patterns we see most often in this industry, and the fix for each. Be honest about which ones apply to you.

01 Asking clients for reviews or testimonials

Your ethics code restricts soliciting them. Build trust with specialty content, credentials, clinician videos and referral relationships.

- [ ] We do this today

02 Listing every specialty

Pick three to five specialties you want more of and give each its own page and campaign.

- [ ] We do this today

03 Slow inquiry response

Set a one-hour response standard and offer a consult time in the first reply.

- [ ] We do this today

04 Pixels on intake forms

Remove ad tracking from anything a prospective client types into, and use tools that sign a BAA.

- [ ] We do this today

05 Marketing full clinicians

Point every channel at the clinicians and hours that are actually open.

- [ ] We do this today

06 Ignoring referral partners

Keep a partner list, touch base monthly, close the loop on referrals and refer back when a client is not your fit.

- [ ] We do this today

SECTION 13 · STARTING FROM SCRATCH

Quick start

If you only have a few hours a week, do these in order.

DONE	WHEN	TASK
☐	**Week 1**	Write the snapshot with open hours, the three personas and your positioning statement.
☐	**Week 2**	Rewrite every clinician's Psychology Today profile around the positioning, with a clear photo and fees.
☐	**Week 3**	Set up the inquiry process: shared inbox, one-hour response standard, consult script and booking link. Remove pixels from forms.
☐	**Week 4**	Claim or clean up Google Business Profiles for in-person offices and list 20 potential referral partners.
☐	**Month 2**	Publish pages for your top three specialties plus a fees and insurance page, and start referral outreach.
☐	**Month 3**	Launch Google search ads on one specialty and start the weekly dashboard.
☐	**Quarter 2**	Add SEO articles, clinician videos and a monthly referral partner email; shift budget toward sources that produce intakes.
☐	**Year 1**	Review caseloads, payer mix, sources and specialties, and decide which panels to keep and which specialties to grow.

NOTES

You have the plan. Want a team to run it with you?

MaaS by CodeSM is the outsourced marketing team for mental health private practices and group practices: therapists, counselors, social workers and psychologists. One team for strategy, creative, paid media, SEO, web and reporting, without hiring a department.

01

A marketing audit

We review your listings, website, reviews, ads and reporting and show you where leads are slipping.

02

See where you stand

We compare your search visibility, reviews and ads with the competitors your customers actually consider.

03

A 90-day plan

You leave with a prioritized 90-day plan: channels, budget, content and KPIs.

04

Or we run it with you

Strategy, creative, paid media, SEO, web and reporting from one outsourced marketing team.

Book a call

trymaas.com/get-a-demo



The outsourced marketing team for mental health private practices and group practices: therapists, counselors, social workers and psychologists.

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