



## Integrated Marketing Communications Plan

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## Table of Contents

|                                       |           |
|---------------------------------------|-----------|
| <u>ASSUMPTIONS</u>                    | <u>3</u>  |
| <u>EXECUTIVE SUMMARY</u>              | <u>4</u>  |
| <u>SEGMENTATION STRATEGY</u>          | <u>5</u>  |
| <u>POSITIONING STRATEGY</u>           | <u>8</u>  |
| COMPETITIVE ANALYSIS                  | <u>9</u>  |
| PERCEPTUAL MAP                        | <u>10</u> |
| <u>MARKETING OBJECTIVES</u>           | <u>11</u> |
| <u>MARKETING MIX</u>                  | <u>12</u> |
| <u>CREATIVE STRATEGY</u>              | <u>15</u> |
| COMMUNICATION OBJECTIVES              | <u>15</u> |
| CREATIVE BRIEF                        | <u>17</u> |
| MESSAGE STRATEGY METHODS              | <u>19</u> |
| PRINT ADVERTISEMENT                   | <u>20</u> |
| TELEVISION COMMERCIAL STORYBOARD      | <u>21</u> |
| <u>MEDIA STRATEGY</u>                 | <u>23</u> |
| <u>OWNED DIGITAL MEDIA</u>            | <u>35</u> |
| <u>DIRECT MARKETING</u>               | <u>44</u> |
| <u>PUBLIC RELATIONS</u>               | <u>46</u> |
| <u>EVENT SPONSORSHIP</u>              | <u>48</u> |
| <u>SUPPORT MEDIA</u>                  | <u>49</u> |
| <u>SALES PROMOTION</u>                | <u>51</u> |
| <u>EVALUATION OF PROMOTIONAL PLAN</u> | <u>52</u> |
| <u>PROMOTION BUDGET</u>               | <u>53</u> |

## ASSUMPTIONS

1. Medical practices in the United States are trending towards ACO structure and will continue to do so for the foreseeable future.
2. MedLink is approved and accepted by all relevant governing authorities.
3. MedLink is compliant with all regulations and privacy laws.
4. MedLink's services are compatible with preexisting medical record systems and software and can be easily integrated into these existing systems.
5. MedLink is accepted as an accurate and viable way to demonstrate quality of care in accordance with the Affordable Care Act and users will be eligible for increased funding.
6. All members of the target market work in a medical practice within the United States.
7. MedLink will sell subscriptions to practices at an average rate of three subscriptions per practice.
8. All subscribers to *Modern Healthcare* fall into the target market of workers in a medical practice.
9. Roughly the same amount of people in the medical community that frequent WebMD.com also visit the site on their mobile phone.
10. All subscribers purchase a full year's worth of subscriptions, and MedLink does not experience any cancellations in the first year.
11. Medical secretaries spend an average of approximately three hours per day on the tasks that MedLink is able to perform.
12. By and large, subscribers are married adults and tend to fall into high income brackets.
13. Most of the impressions achieved by MedLink's marketing efforts are affected by an unknown duplication rate. This duplication rate will not be included in calculations nor will it be accounted for in the IMC plan.

## EXECUTIVE SUMMARY

MedLink is an all-inclusive care coordination medical record system with an emphasis on **Accountable Care Organization values and metrics**. MedLink's service includes a **centralized database** of patient medical history, the ability to **follow-up with patients** through mobile push surveys and notifications, **prescription refill tracking**, and **advanced analytics** that provide insight into **treatment effectiveness**. Information provided by MedLink can be used by medical practices to demonstrate **quality of care** and **prove eligibility for increased funding** under the new payment structure put in place by the Affordable Care Act.

The following integrated marketing communications (IMC) plan extensively details MedLink's planned introduction to the market and the methods that will be used to reach marketing and communication objectives. Tactics include a wide variety of **traditional media**, **paid digital media**, **owned digital media**, **effective public relations**, **event sponsorship**, **personal sales teams**, and **direct marketing** techniques. These methods will combine to reach MedLink's primary first year communication objective of **80 percent awareness** within the target market.

The target market is comprised of **10,517,000 individuals** who work in a medical office. This specific target market was chosen so that MedLink could gain awareness within several different, yet related, subsets of influencers that work in the medical field. MedLink wishes to reach physicians, administrators, nurses, secretaries, and management.

MedLink is positioned as a groundbreaking, all-inclusive service created for the ACO revolution that includes all of the features offered by competitors, but at a more reasonable price. The service will be distributed directly to healthcare providers, at a **monthly subscription rate of \$200 per doctor**.

Achievement of **2 percent use** in the target market will result in **9,672 subscriptions**, or total sales revenue of **\$23,212,800** during the first year. Success will result in a market share of 1.7 percent. The IMC budget has been set at **\$1,970,794.45**, or 8.5 percent of total projected revenue.

The campaign theme "**Be there.**" will be integrated throughout the IMC plan.

**MedLink launches on January 1<sup>st</sup>, 2014.**

# SEGMENTATION, TARGETING, AND POSITIONING

## Segmentation Strategy

### Potential Target Markets

#### Medical Professionals/Healthcare Providers<sup>1</sup>

- Demographics
  - Occupation: Medical
  - Marital Status: Married
- Geographic: Cities with 50,000+ population
- Psychographics
  - Moderate to heavy outdoor activity
  - Moderate newspaper readers
  - Light TV usage
  - Enjoys traveling
  - Values safety, health, success, universalism, and self-actualization
  - Fiscally conservative but socially liberal

#### 6+ doctor visits in the last 12 months<sup>2</sup>

- Demographics
  - Age: 45-54
  - Occupation: Professional and Related; Management, Business, and Financial Operations
  - Household Income: \$75,000+
  - Marital Status: Currently married and Widowed/Divorced/Legally separated
  - Race: Caucasian
- Geographic: North East and Midwest
- Psychographics
  - Heavy newspaper readers

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<sup>1</sup> Appendix A1

<sup>2</sup> Appendix A2

### Smartphone Users<sup>3</sup>

- Demographics
  - Education: Graduated College or higher
  - Occupation: Professional and Related; Management, Business, and Financial Operations; Sales and Office
  - Age: 18-44
  - Household Income: \$75,000+
  - Marital Status: Never married/Engaged
  - Race: Asian
- Geographic: West and South
- Psychographics
  - Heavy magazine readers
  - Heavy Internet usage
  - Heavy outdoor activity

### **Best Target Market**

#### Medical Professionals/Healthcare Providers

- Demographics
  - Occupation: Medical
  - Marital Status: Married
- Geographic: Cities with 50,000+ population
- Psychographics
  - Moderate to heavy outdoor activity
  - Moderate newspaper readers
  - Light TV usage
  - Enjoys traveling
  - Values safety, health, success, universalism, and self-actualization
  - Fiscally conservative but socially liberal

#### Benefits Sought

In accordance with the Affordable Care Act, Accountable Care Organizations – groups of organized physicians, hospitals and other health care providers who receive federal monetary compensation in return for improving quality of patient care while reducing total cost – have faced accusations of violating antitrust laws due to the inability to provide appropriate metrics that support their duty as an ACO.<sup>4</sup> The MedLink application is designed to address this problem by providing and reporting information specifically

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<sup>3</sup> Appendix A3

<sup>4</sup> Appendix A4

tailored to the Affordable Care Act's quality measures. The five metric domains of the Affordable Care Act<sup>5</sup>, as well as the unique service MedLink will provide to address each, are as follows:

- **Patient/Caregiver Experience:** MedLink will administer and record electronic follow up surveys relevant to reporting the patient's point of view of the care they were provided with.
- **Care Coordination:** MedLink will improve the efficacy of coordinating schedule-based healthcare actions by providing an easy to use interface to electronically schedule appointments and keep track of patients' follow-through of prescribed actions outside of the office (e.g. picking up and using prescriptions on time)
- **Patient Safety:** MedLink will provide a means of communication between the patient and the healthcare provider in between appointments. By doing so, physicians will have a greater ability to monitor patient safety and well being by allowing patients to easily check in with their doctor's office if symptoms surface or they wish to seek medical advice.
- **Preventative Health:** By providing an easy to access channel of communication between the patient and the doctor, physicians will now have a greater ability to hold their patients accountable for following through with prescribed healthcare actions outside of the office.
- **At-Risk Population/Frail Elderly Health:** MedLink will allow healthcare providers to oversee the well being of the segments of patients most easily susceptible to harm. Healthcare providers have the most concern for these patients in between appointments, making MedLink especially beneficial by allowing physicians to monitor at-risk patient activity.

#### Usage State and Usage Rate

Due to the fact that MedLink functions as an electronic health record database and is operational 24/7, doctors will be regular users. Additionally, it is in their best interest to actively use the services of MedLink due to the fact that they strive to provide evidence of quality care in accordance with the potential benefits received through the Affordable Care Act. Because the MedLink operating system is structured in accordance with the quality metrics of this act, users on the healthcare provider side of the market will be provided with the highest level of support. The target market consists of 10,517,000 individuals.

Targeting all medical office workers is a clear choice for several reasons. Due to the nature of the MedLink application as well as its intended users, medical professionals and

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<sup>5</sup> Appendix A5

health care providers are the most evident choice for segmentation. However, upon further examination, the notion that doctors and physicians are not the sole decision-makers in a medical office is also worth consideration. It is more common for business decisions in these environments to be made by other professionals in the office such as hospital administrators. Digging even deeper into this idea, the logical conclusion can be made that business decisions in the workplace are ultimately a sum of all of the organization's parts, meaning that nurses and medical office workers may also have an impact upon business decisions.

## Trade Target Market

Channel Strategy: Producer to consumer. In this instance, subscriptions to MedLink will be sold to medical practices directly, meaning no trade target market.

## Positioning Strategy

Positioning Statement: For medical professionals seeking a means of improving and providing evidence of **quality care**, MedLink is a groundbreaking application that will help physicians monitor patients' health-related activities **outside of the office**, measure, and report quality care in accordance with the Affordable Care Act, thus maximizing patient treatment outside of the office through an efficient and shared channel of communication.

- MedLink will follow a **benefit focused positioning strategy**:
  - The app is a functional and organizational resource for both patients and doctors
  - It has the bottom line benefit of improved quality of healthcare
- Important Attributes
  - **Care** – This application provides a means for physicians to supply evidence of quality care in accordance to the Affordable Care Act's quality metrics.
  - **Centralization** – Provides patients with a centralized location for all medical information, thus improving the health care provider's efficiency of service.
  - **Communication** – MedLink bridges the communication gap between doctors and patients while providing healthcare professionals with data pertinent to patient follow-through of prescribed treatment and therapy.
  - **Specialization** – MedLink is a unique application that organizes and reports the measure of quality healthcare. It contains specific features and functions specifically tailored to the quality care metrics of the Affordable Care Act.
  - **Accessibility** – By providing the service in a mobile app, format there will be low barriers for use as it will be accessible anytime and anywhere.

## Competitive Analysis

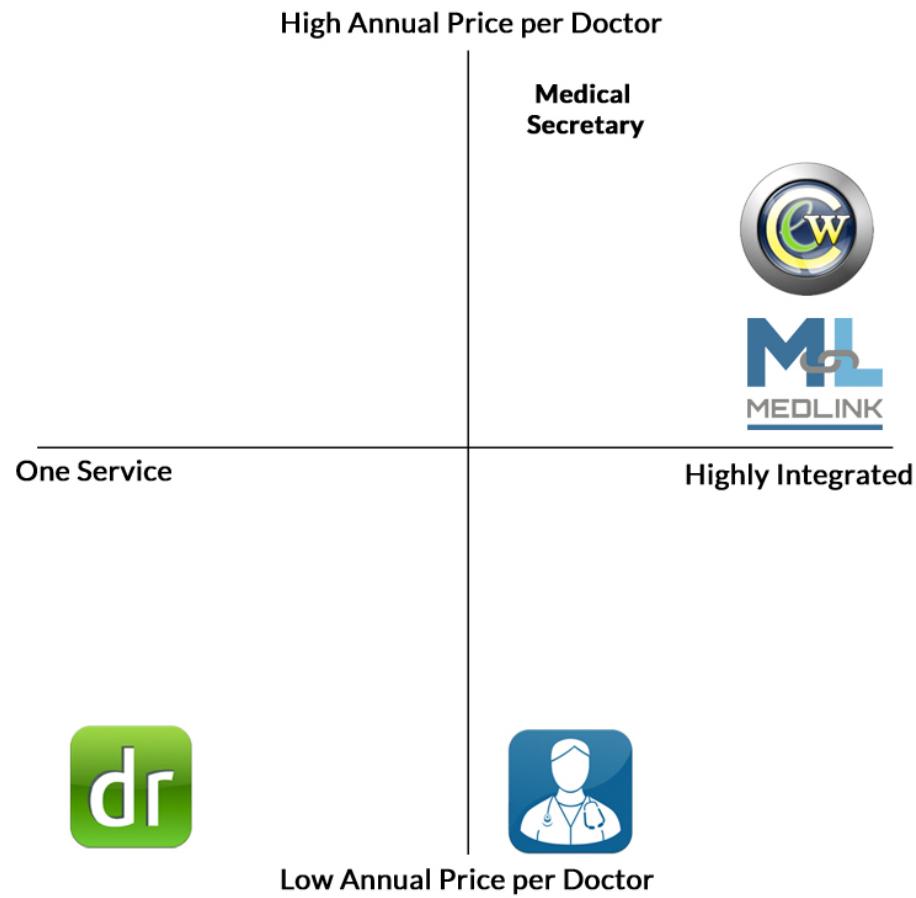
| Competitors              | Competitor Features  | Differentiation From Competitors  |
|--------------------------|--|---|
| eClinicalWorks (CCMR)    | <p>This web based solution helps clients increase high performance care teams, drive patient engagement, and integrate actionable reporting into population health management and quality improvement workflows.<sup>6</sup> eClinicalWorks also includes analytics, care planning, a referral network, and aids transitions in care.</p>  | <p>MedLink provides a system like eClinicalWorks, offering similar features but at a lower price. eClinicalWorks sells subscriptions at a price of \$250 per doctor each month. To encourage medical practices to choose this company instead, MedLink will charge a lower monthly subscription price of \$200 per doctor.</p>  |
| Medical Secretaries      | <p>Services provided by secretarial staff include:</p> <ul style="list-style-type: none"> <li>• Documentation of patient history</li> <li>• Visit follow-up</li> <li>• Scheduling</li> <li>• Organization of medical records.</li> </ul>   | <p>Aside from being an electronically integrated care coordination solution, MedLink differentiates itself from the traditional use of medical secretaries by increasing the efficacy of these services through providing them with a solution that integrates patient involvement and documentation of medical records. MedLink also incorporates 24/7 accessibility, allowing patients to provide feedback at their own leisure by responding to electronic surveys sent as push notifications from the doctor to the patient, rather than only allowing contact during business hours.</p> |
| DrChrono                 | <p>DrChrono is based primarily on expediting the paperwork procedure by digitizing the billing process via the patient's mobile device.<sup>7</sup> The patient care platform consists of:</p> <ul style="list-style-type: none"> <li>• Mobile-based Electronic Health Record (EHR)</li> <li>• Patient portal</li> <li>• Web based practice management and medical billing system</li> </ul> | <p>MedLink incorporates the central functions provided by DrChrono by billing patients directly to their mobile platform, but also includes a plethora of other features, including reporting for the Affordable Care Act quality care metrics and the ability for physicians to directly communicate with their patients.</p>  |
| Cerner Physician Express | <p>This mobile application enables quick access to review clinical information and book appointments. From a patient list, a provider can quickly access medical records and billing information.<sup>8</sup></p>  | <p>Like Cerner Physician Express, MedLink is also a workflow extension that allows physicians to refer to a patient's current bills and schedule appointments. However, MedLink offers a plethora of features including patient follow-up, reporting for the Affordable Care Act quality care metrics, the ability for the physician to communicate with patients, and others.</p>  |

<sup>6</sup> Appendix B1

<sup>7</sup> Appendix B2

<sup>8</sup> Appendix B3

## Perceptual Map



**Vertical Axis:** Annual price per doctor

The Y-Axis of the perceptual map pertains to the price for a given Care Coordination Medical Record system.

- Physicians understand that annual expenses for secretarial services for a given year are quite expensive. The median hourly wage for a secretary in a medical practice is approximately \$14.50.<sup>9</sup> Given the assumption that 3 hours of their work per day goes into coordinating medical records with patient care, and that they work roughly 260 days in a year, annual expenses equate to approximately  $\$14.50 \times 3 \text{ hours} \times 260 \text{ days} = \$11,310$  per secretary.
- Mobile applications DrChrono and Cerner Physician Express are free of charge, therefore placing them at the bottom of the perceptual map.
- In accordance with MedLink's pricing strategy, MedLink is positioned just below eClinicalWorks.

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<sup>9</sup> Appendix B4

### **Horizontal Axis: Integration of Services Provided**

The x-axis of the perceptual map shows the amount of specialized services each industry competitor provides. The further right on the x-axis, the more extensive the integration of services and the closer the competitor is to offering an all-inclusive system.

- DrChrono is mobile application centralized primarily around the billing of patients. Although highly functional in this aspect, it provides no other services integrated in a care coordination medical record system. It is the furthest left on the perceptual map.
- Secretarial services are an essential facet of any medical practice. However, in terms of functionality for coordinating medical records with patient care in between appointments, they are limited to physical documentation, patient follow-up calls, or the use of an integrated care coordination system. Medical secretaries are located slightly more right than DrChrono because they offer more services.
- Cerner Physician Express functions as a workflow extension for physicians outside of the office, by allowing them to review and fill patient orders as well as access comprehensive clinical information such as problems, diagnosis, allergies, medications, vitals and more. However, Cerner Physician Express does little more than this and is bounded by its required use through a mobile device, thus hindering its ability to be an all-inclusive care coordination medical record system.
- Among competitors in this industry, eClinicalWorks and MedLink offer similar features, striving towards an all-inclusive integrated care coordination medical record system including a centralized database for patient medical history and the ability to follow-up with patients through mobile push surveys, among other services. This makes eClinicalWorks and MedLink as the industry competitors with the most all-inclusive care coordination medical record system services, and thus the organizations positioned most right on the perceptual map.

### **Marketing Objective**

From January 1, 2014 to December 31, 2014, MedLink plans to increase the number of subscribers to a total number of **9,672**, or two percent of total medical practices in the United States.

## **Forecasted First Year Sales**

$$\frac{10,517,000 \text{ total TM}}{161,200 \text{ total medical practices in U.S.}^{10}} = 65.24 \text{ members of TM per practice}$$

$$\text{Usage rate of target market} = 10,517,000 \times 2\% = 210,340 \text{ individuals}$$

$$\frac{210,340 \text{ TM users}}{65.24 \text{ members of the TM per practice}} = 3,224 \text{ practices}$$

$$3,224 \text{ practices} \times 3 \text{ subscriptions per practice} = 9,672 \text{ subscribers}$$

(See Assumption 7)

$$\text{Total revenue} = 9,672 \text{ subscribers} \times \$200 \text{ per month} \times 12 \text{ months} = \$23,212,800$$

$$\text{IMC budget ceiling} = \$23,212,800 \times 20\% = \$4,642,560$$

## **Marketing Mix**

### **Product Strategy**

MedLink is an all-inclusive care coordination and communication system with an emphasis placed upon Accountable Care Organization values and metrics. Information provided by MedLink can be used by medical practices to demonstrate quality of care and prove eligibility for increased funding under the new payment structure put in place by the Affordable Care Act. As many of MedLink's features revolve around the new payment structure, MedLink is distinguishable from services that focus upon a fee-based system.

MedLink takes advantage of technology to develop a superior communication channel. The widespread use of smartphones has allowed for this communication method to develop. Not only can doctors communicate with patients through text, but helpful links to external websites, surveys, photos, and much more can also be included. This allows for robust communication and the development of data that can easily be tracked – something that secretaries and mailings cannot offer.

MedLink is differentiated from many other medical apps on the market because it is targeted towards doctors and provides services for them as well as patients. By including functionality for both doctors and patients there are incentives for both to use the app: leading to a level of commitment and two-way communication that other apps cannot

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<sup>10</sup> Appendix B5

offer. Instead of offering one specialized service, like consolidating medical records, MedLink provides a multitude of services, leading to greater usefulness and integration. MedLink will appeal to doctors who are tech savvy, forward-looking, and wish to provide the highest quality of service possible to patients.

**Features:** Doctors have the ability to look up a given patient's entire medical history, fill prescriptions, schedule appointments and check up with patient follow-through.

**Advantages:** One intellectual advantage for medical practices and their patients is the ability to have everything in one easily accessible, centralized location. Additionally, the MedLink application is structured around the five quality measures for health care as defined by the Affordable Care Act.<sup>11</sup> By giving health care providers the ability to measure, record, and report quality health care through these metrics, medical clinics can capitalize on the changes in the payment system from the ACA.<sup>12</sup>

**Benefits:** Due to the fact that MedLink provides an easy to access channel of communication, patients gain the emotional benefit of improved comfort knowing that their physician is extending their care beyond the limits of the office. Doctors who utilize MedLink to check up on patients outside of office hours gain several emotional benefits through their demonstration of increased involvement. Physicians gain an increased sense of satisfaction knowing that they are putting in extra time outside of scheduled appointments in order to ensure that they are providing their patients with their best output of quality care. Doctors also gain the emotional benefit of security through the knowledge that their patients can be comforted and cared for outside of the office. Physicians can feel secure that the quality of care they are delivering to their patients will be accurately measured and reported in accordance with the Affordable Care Act, ensuring the fact that they will receive just compensation.

### **Pricing Strategy**

The pricing for MedLink subscription purchases will follow a competitive pricing strategy based on the amount of doctors operating at a given medical practice. Although MedLink only has one close competitor, eClinicalWorks, they offer many similar services and are closely positioned to MedLink in the market. This competitor has set a reference price for these services at \$250 per doctor each month. MedLink's monthly subscription fee will be lower than the accepted reference price to encourage trial and use in the target market in the absence of an established reputation. A competitive monthly subscription fee of \$200,

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<sup>11</sup> Appendix C1

<sup>12</sup> Appendix C2

a more aesthetically pleasing and useful website design, increased customer support, and knowledgeable personal sales teams will ensure that MedLink is the preferred alternative to eClinicalWorks and any additional companies that may arise in this sector.

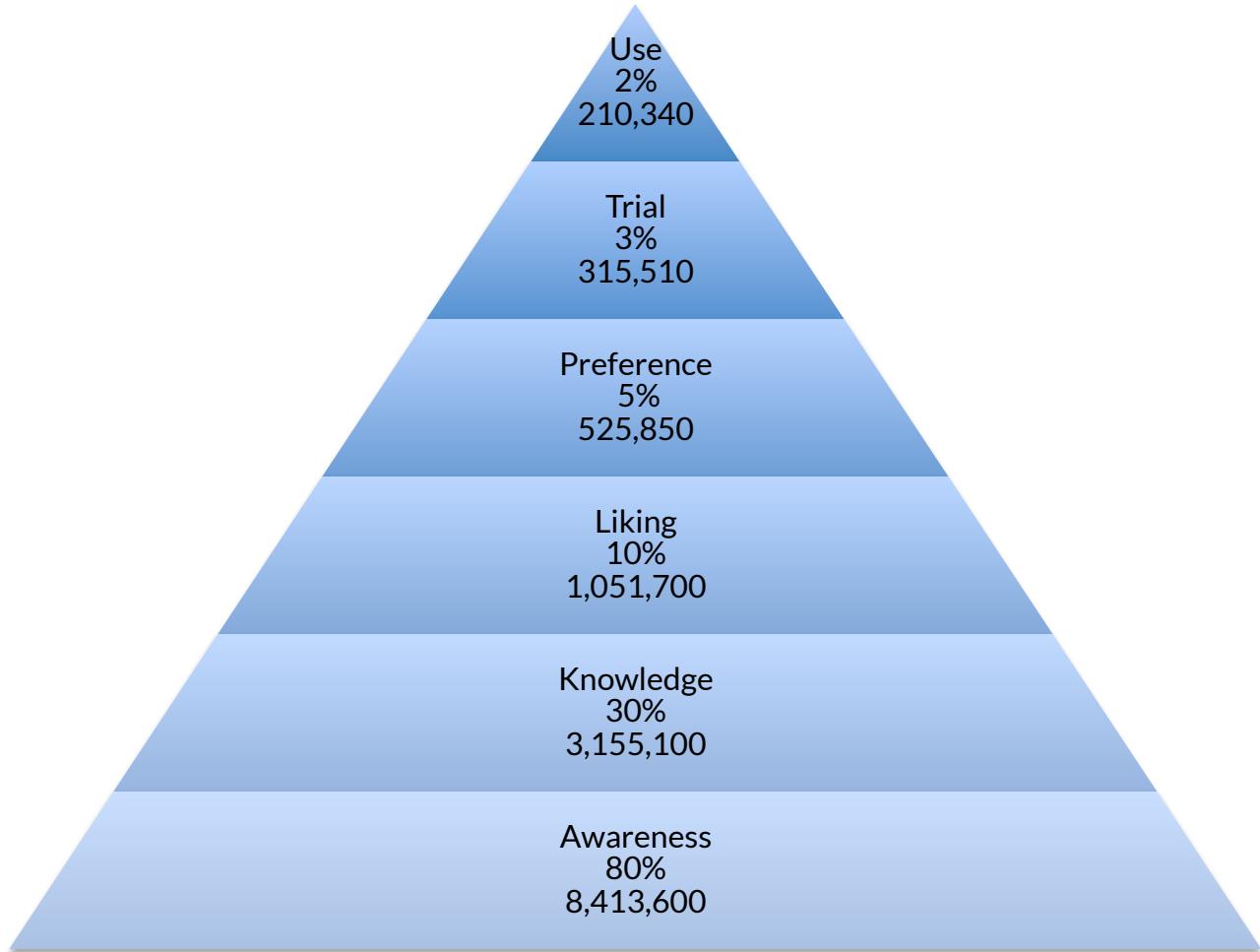
### **Distribution Strategy**

MedLink subscriptions will be sold directly to medical practices, thus fulfilling a business to business distribution strategy. This is the most fitting and logical distribution strategy due to the fact that MedLink's service can be directly distributed to medical practices.

MedLink will employ teams of sales representatives to visit medical practices and educate potential users. After signing up for service, MedLink will install the program in the subscriber's office. This also relates directly to the pricing strategy. Subscriptions will be controlled on a monthly basis by MedLink and functional access to the program will be permitted in accordance with the given practice's ability to make payments on schedule.

## CREATIVE STRATEGY

### Communication Objectives



#### Awareness

MedLink aims to **increase awareness** within the target market to 80 percent from January to December of 2014. Reaching this level will pave the way for personal sales teams, so when presentations are made, a majority of medical professionals have heard of the brand. Business to business markets often require two companies to develop a relationship; establishing awareness is the first step MedLink must take to do this with medical practices across the United States.

#### Knowledge

In this timeframe, MedLink also plans to transition 30 percent of the target market to an educated and informed state. This essential step details the features and benefits that MedLink's service will provide. Medical offices that move into this stage may begin

examining their current practices and recognizing ways that they can improve through use of MedLink.

### **Liking**

Ten percent of the target market will transition into this stage by the end of the first year. Owned digital media and personal sales teams will be largely responsible for moving medical offices to this phase.

### **Preference**

Five percent of the target market will be convinced that MedLink is the most innovative and useful product in its category, and the superior way to meet ACO quality measures by the end of the first year. It is important to reach this level of preference because it will signify a successful differentiation from competitors. Medical offices in this stage may eventually transition into trial and use states, even if it is not during the first year.

## Creative Brief

**Brand Name:** MedLink

**Positioning Statement:** For medical professionals seeking a means of improving and providing evidence of quality care, MedLink is a groundbreaking application that will help physicians monitor patients' health-related activities outside of the office, measure, and report quality care in accordance with the Affordable Care Act, thus maximizing patient treatment outside of the office through an efficient and shared channel of communication.

## Target Market Definition

### Medical Professionals/Healthcare Providers

- Demographics
  - Occupation: Medical
  - Marital Status: Married
- Geographic: Cities with 50,000+ population
- Psychographics
  - Moderate to heavy outdoor activity
  - Moderate newspaper readers
  - Light TV usage
  - Enjoys traveling
  - Values safety, health, success, universalism, and self-actualization
  - Fiscally conservative but socially liberal

## Communication Objective

MedLink aims to **increase awareness** within the target market to 80 percent from January to December of 2014.

## Benefits

- Patients gain the emotional benefit of improved comfort knowing that their physician is extending care beyond the limits of the office.
- Physicians gain an increased sense of satisfaction knowing that they are putting in extra time outside of scheduled appointments in order to ensure that they are providing their patients with their best output of quality care.
- Doctors also gain the emotional benefit of security through the knowledge that their patients can be comforted and cared for outside of the office.
- Physicians can feel secure that the quality of care they are delivering to their patients will be accurately measured and reported in accordance with the Affordable Care Act, ensuring the fact that they will receive just compensation.

## **Support**

- Medical records → All medical information is conveniently consolidated into one place
- Manages prescriptions → Users can monitor and keep track of prescription refills. Doctors will see if/when a patient refills their prescription
- Push notifications → Reminds users of upcoming appointments, daily treatment tasks, and prescription refills which keeps them organized
- Patient health ratings (Rating and optional notes) → Gives doctors feedback on the effectiveness of their treatment plan and insight into how the patient is feeling

## **Campaign Theme – “Be there.”**

- “Be there.” is a call to action, a reminder to support those around you. In the context of MedLink’s advertisements and promotional materials, this service is shown as an effective way for the target market to be present in the lives of their patients. Both doctors and those close to people dealing with disease and sickness are often looking for a solution to this problem. MedLink is the solution.
- The idea of “Be there.” identifies with the altruistic spirit and identity behind the medical profession.
- Advertisements will bring heavy and personal connotations to the forefront of the mind when viewed. By connecting the MedLink brand to this theme, MedLink will hopefully become associated with each person's unique situation and life experiences.

## Message Strategy Methods

- **Awareness:** As MedLink enters the market as a new application, the company simply aims to **increase awareness** within the target market to 80 percent from January to December of 2014. To do this, MedLink will **utilize repetition** by being persistent with various types of advertising and promotion.
- **Knowledge:** In this timeframe, MedLink also plans to transition 30 percent of the target market to an educated and informed state. This can be accomplished through providing supplementary information on the company's website.
- **Liking:** MedLink will influence liking by highlighting the innovative qualities of MedLink throughout advertisements and promotional materials. MedLink advertisements will achieve this by showing doctors that this service will bring their practice to the forefront of medical technology. Ten percent of the target market will transition into this stage by the end of the first year.
- **Preference:** Sales teams and advertisements will combine to convince five percent of the target market that MedLink is the most innovative and useful product in its category, and the superior way to meet ACO quality measures. MedLink will establish this by showing the ways that the increased communication and data collection provided by MedLink will streamline the practice and improve patient/doctor communication.

## Print Advertisement



The print advertisement will highlight an illness that can be positively impacted through increased patient/doctor communication outside of the office. Utilization of a statistic appeals to the logical side of the target market, yet this is connected to an emotional appeal by offering a solution to the problem presented through subscription to MedLink. Use of "Be there." makes the print advertisement consistent with all of MedLink's other marketing tactics. Owned digital media is also incorporated, providing the reader with the option to gain more insight on the company.

## MedLink Commercial Storyboard

**Title of video:** "Gravity"

**Description of Project:** Commercial for MedLink's "Be there." campaign.

**Purpose of video:** Increase awareness among MedLink's target market

**Length:** 30 seconds

**Visual inspiration:** Sigur Rós – Glósóli

**Possible director:** Arni and Kinski

| Visual: Description   | Time | Audio and Scene Description   |
|---|------|---|
| <p>At some point in their lifetime, one in five Americans will experience depression.</p> | 10s  | <p><b>Audio:</b> Simple piano. Slow tempo.</p> <p><b>Description:</b> Ad begins by showing a fact about depression. White letters against a dark background. Fades in and fades out. The background transitions to a foggy grey as a teenage boy appears on screen.</p>   |
|        | 7s   | <p><b>Audio:</b> Maintain simple piano. Slow tempo.</p> <p><b>Description:</b> Grey-scale colors symbolizing serious undertones and adding gravity to ad. Boy slowly dribbling (kicking) nondescript, smooth, red ball up a hill. Rocky, grassy, windswept landscape. Late autumn. Boy is alone. High contrast between the red ball and grey around him. Hill is a common metaphor for struggle; red ball symbolizes weight of depression. Playing into recognized symbols.</p> |

|  |    |   |
|--|----|---|
|  | 8s | <p><b>Audio:</b> Maintain simple piano. Slow tempo.</p> <p><b>Description:</b> Boy reaches top of hill. Wind is blowing grass. Boy sits down. The red ball at his feet is caught by the wind and tumbles down hill. Words “Be there.” fade onto the screen – same white font.</p>                           |
| <p><b>Better communication. Better health.</b></p> | 5s | <p><b>Audio:</b> Simple piano. Slow tempo. Music gradually slows and fades out as ad ends.</p> <p><b>Description:</b> Camera pans to view of red ball rolling into the distance. MedLink logo and slogan appear on screen in same white font as video fades to the same black background it started as.</p> |

## MEDIA PLAN

### Media Strategy

Refer to Communication Objectives on page 15

#### Reach

$$Reach = \frac{\text{Number of People Exposed to Advertisement in Target Market}}{\text{Total Number of People in Target Market}}$$

$$\text{MedLink's Reach} = \frac{8,413,600}{10,517,000} = 80\%$$

#### Frequency

MedLink's media plan will result in an **average frequency of 13.67** impressions per month. The lowest amount of monthly exposures is 11, which is found in November. This is a subsequent byproduct of the **pulsing scheduling method**. The advertising frequency is therefore above the effective range of 3-9 impressions every four weeks. This is due to MedLink being new to the market, which requires more opportunities for exposure. A diverse combination of advertising methods **utilizing a push strategy** will keep MedLink fresh in the minds of the target market while increasing awareness of the company to key influencers within medical practices.

#### Gross Rating Points

Gross Rating Points illustrate the relative weight of MedLink's advertising campaign.

$$GRP = Reach \times Frequency \times 100$$

$$\text{MedLink's Gross Rating Points} = 80\% \times 13.67 \times 100 = 1093.6$$

#### Continuity Method

MedLink will employ a **pulsing method** to reduce costs and remain at the forefront of the target market's mind. Increased promotion during specific quarters of the year paired with a steady rate throughout the year will establish this strategy. Targeting healthcare professionals within the target market will enable MedLink's application of a push strategy. The push will come from advertisements aimed at healthcare professionals; more specifically, MedLink hopes to gain the interest of key influencers and decision makers that would potentially be interested in the service. This will effectively promote MedLink in front of qualified healthcare professionals.

### Length and Size of Advertisements

- **Half page, full color bleed:** This format will be used in all of the magazines and trade journals chosen. It will balance the cost effectiveness of a half page advertisement while still catching the reader's attention by appealing to the emotional benefits MedLink offers. A variety of the same advertisement will be utilized to refrain from becoming overly repetitive and trite while remaining consistent with the overarching campaign theme.
- **Thirty-second commercial:** This commercial will run on one channel to make most efficient use of the budget. A thirty-second ad will introduce the consumer to MedLink. This method is more cost effective than a more extensive commercial and accomplishes the preliminary goal of awareness.
- **Medium rectangle (300x250):** Online advertisements will be static and will link to MedLink's website for individuals who wish to gain more insight into what the company offers.

### Media Objectives

- **Reach:** MedLink endeavors to achieve an **80 percent awareness rate** among medical practices in the United States. The geographic scope of the media plan is across the entire country, as a majority of the media vehicles MedLink will advertise in are distributed on a national scale. This will allow for a broad range of medical professionals within the target market to be exposed. Achieving a reach of 80 percent will allow for a majority of medical professionals to be familiar with the brand, which can be built upon in subsequent years to further MedLink's communication and marketing goals.
- **Frequency:** A yearlong advertising effort that includes print, television, and Internet media will combine for a total of **13.67 impressions** on average over the course of four weeks. This frequency will make members of the target market acquainted with the brand and stimulate curiosity, while introducing them to a new and innovative service.
- **Gross Rating Points:** An 80 percent awareness rate and 13.67 impressions have given MedLink a **GRP of 1084** for the first year. This is a healthy GRP for the company because it combines an ambitious reach – 80 percent awareness within the target market – with a consistent frequency of 13.67 impressions on average over the course of a month.

### **Media Scheduling**

In order to leverage the marketing budget most efficiently, MedLink will implement a **pulsing strategy**. This method will allow MedLink to effectively reach members of each of the relevant target markets approximately 13.67 times within a four-week period. There

will be a constant rate of paid digital media advertising throughout the year acting as a baseline, which will be reinforced by various print and television advertisements to achieve 80 percent awareness within twelve months. These supplements will also heavy up during certain periods of the year, including the first and third quarters, to remain consistent in MedLink's overall advertising efforts.

## Media Mix

MedLink will apply an **assorted media strategy** to extend the reach within the target market. Since MedLink is in its infant stages, the primary goal is to simply establish awareness within the main target audience. Focusing on an assorted media strategy brings a diverse array of medical professionals into contact with the brand. The following strategies will be used on these various channels:

- **Television:** MedLink is purposefully choosing to advertise on one specific cable television station despite the low rate of usage in the medical target market. Since doctors are light to moderate television watchers, with an index of 127<sup>13</sup> in this category, there will be less of an emphasis on this vehicle. By using this strategy, MedLink will be able to focus on advertising ventures that are more relevant to the media habits of doctors while still exposing them to the brand on a channel they frequent.
- **Print:** MedLink has identified several national magazines and trade journals that are not only relevant to the target market, but also fit well with the medical context of the service. An index of 138<sup>14</sup> pertaining to heavy magazine readership ensures that the target market is 38 percent more likely than the average American to engage in magazine reading.
- **Internet:** MedLink plans to use a strategic combination of both paid and owned Internet media to increase awareness of the brand among medical professionals. The company will also place advertisements on mobile applications to reach healthcare providers with smartphones. Internet will be the foundation for MedLink's pulsing strategy as healthcare professionals are moderate users, evidenced by an index of 137.<sup>15</sup> This coupled with advertising on websites that have a high concentration of traffic from the target market makes this vehicle a superior location for MedLink advertisements.

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<sup>13</sup> Appendix D1

<sup>14</sup> Appendix D2

<sup>15</sup> Appendix D3

## Media Vehicles

### Magazines

#### O, The Oprah Magazine<sup>16</sup>

- $\text{Reach} = \frac{1,343,000 \text{ readers in TM}}{10,517,000 \text{ total medical professionals}} = 12.8\%$
- Frequency: 1 half-page, full color ad per issue, 6 times per year. See media schedule below.
- $\text{CPM} = \frac{\$86,075}{1,343,000} \times 1000 = \$64.09$
- Index: 205
- O, The Oprah Magazine has an index of 205. This signifies that members of the target market are twice as likely to be readers than the average American. O is capable of reaching nearly 13 percent of the target market; when coupled with a reasonable CPM, this becomes an ideal location for MedLink advertisements. O is also in a different magazine category than MedLink's other print media choices, which should lead to a lowered risk of duplication. O magazine will be **used for reach rather than frequency** since it is capable of encompassing almost 13 percent of the target market.

#### WebMD the Magazine<sup>17</sup>

- $\text{Reach} = \frac{1,111,000 \text{ readers in TM}}{10,517,000 \text{ medical professionals}} = 10.6\%$
- Frequency: 1 ad per issue. Advertisements placed in 6 issues. See media schedule below.
- $\text{CPM} = \frac{\$57,900}{1,111,000} \times 1000 = \$52.11$
- Index: 265
- The WebMD magazine is a logical place to advertise for a medical service like MedLink, which is supported by an index of 265. This figure signifies that members of the target market for medical professionals are 165 percent more likely than the average American to be readers. WebMD the Magazine is targeted to healthcare providers and is fairly expensive, as indicated by the CPM, ensuring that it will be best used for **reach**.

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<sup>16</sup> Appendix D4

<sup>17</sup> Appendix D5

## Better Homes & Gardens<sup>18</sup>

- $\text{Reach} = \frac{3,025,000 \text{ readers in TM}}{10,517,000 \text{ medical professionals}} = 28.8\%$
- Frequency: 1 half-page, full color ad per issue. Advertisements placed in 12 issues, one per month. See media schedule below.
- $\text{CPM} = \frac{\text{media cost}}{\text{target market audience}} \times 1000 = \frac{\$16,114}{3,025,000} \times 1000 = \$5.33$
- Index: 173
- Better Homes & Gardens has a high index for how many people the magazine reaches in the target market, as they are approximately 73 percent more likely to read this magazine than the average American. The CPM is also reasonable, meaning it is somewhat inexpensive for us to spread awareness for MedLink. Better Homes & Gardens is one of the top six magazines most likely to be found in doctor's offices and medical clinics<sup>19</sup> making it beneficial for frequency.

## **Trade Journals**

### Modern Healthcare<sup>20</sup> (Assumption 8)

- $\text{Reach} = \frac{70,571 \text{ readers in TM}}{10,517,000 \text{ medical professionals}} = 2.1\%$
- Frequency: 1 half-page, full color ad per issue; advertisements placed in 18 issues. See media schedule below.
- $\text{CPM} = \frac{\text{media cost}}{\text{target market audience}} \times 1000 = \frac{\$7,935}{70,571} \times 1000 = \$112.44$
- A leading news source, Modern Healthcare showcases healthcare business news, opinion, and information. Modern Healthcare is a national trade magazine that is ranked number one among healthcare executives, making it appropriate for MedLink advertisements.<sup>21</sup> By advertising in this well-known resource, MedLink will increase the chances of reaching an influencer in a medical office. Though expensive, the price can be justified by the fact that 88 percent of the total audience influences purchasing decisions. Research has also indicated that 71 percent of readers believe that advertisements in Modern Healthcare educate and are an important part of the publication. This publication will be used for frequency, as it is more focused on the target market and is relatively inexpensive compared to our other advertising efforts. A combination of these factors makes Modern Healthcare a superior location for MedLink advertisements.

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<sup>18</sup>Appendix D6

<sup>19</sup>Appendix D7

<sup>20</sup>Appendix D8

<sup>21</sup>Appendix D9

## Psychology Today<sup>22</sup>

- $\text{Reach} = \frac{470,000 \text{ readers in TM}}{10,517,000 \text{ medical professionals}} = 4.5\%$
- Frequency: 1 half-page, full color ad per issue. Place ad in every monthly issue. See media schedule below.
- $\text{CPM} = \frac{\text{media cost}}{\text{target market audience}} \times 1000 = \frac{\$8,925}{470,000} \times 1000 = \$18.99$
- Index: 331
- Psychology Today has an incredibly high index of 331, meaning that members of the target market are 331 percent more likely to read this than the average American. Psychology Today's content also meshes well with the medical field and an advertisement for MedLink would not seem out of place. Although the reach is rather low, the high concentration of the target market in Psychology Today's readership warrants frequent ad placement. Since Psychology Today is **more cost effective**, it will be used for **frequency**, as indicated by running advertisements in each monthly issue.

## Television

### TLC<sup>23</sup>

- $\text{Reach} = \frac{2,973,000 \text{ watch in TM}}{10,517,000 \text{ medical professionals}} = 28.3\%$
- Frequency: Two television advertisements will air throughout the year. See media schedule below.
- $\text{CPM} = \frac{\text{media cost}}{\text{target market audience}} \times 1000 = \frac{\$20,000}{2,973,000} \times 1000 = \$6.73$
- Index: 145
- TLC's index of 145 suggests that MedLink should air commercials on this station because members of the target market are 45 percent more likely to watch this channel. Healthcare professionals most frequently watch primetime television, with an index of 113<sup>24</sup>, so MedLink's commercials will air between the hours of 6:30pm and midnight. MedLink will use TLC for **reach**, due to the fact that this channel is able to reach 28.3 percent of the target market.

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<sup>22</sup> Appendix D10

<sup>23</sup> Appendix D11

<sup>24</sup> Appendix D12

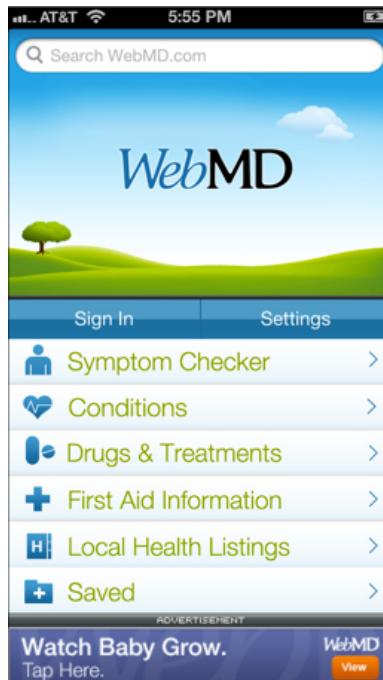
## Internet

### WebMD Online<sup>25</sup>

- $Reach = \frac{2,430,000 \text{ visitors in TM}}{10,517,000 \text{ medical professionals}} = 23.1\%$
- $CPM = \$10$
- Index: 225
- $Cost = \frac{2,430,000 \times \$10}{1000} = \$24,300$
- WebMD.com has an index of 225 and is incredibly relevant to the service provided by MedLink, making it a valuable place for advertisements. This website will be used for **frequency**, since ads will run throughout the year. (See media schedule)

### WebMD Mobile App (Assumption 9)

- $CPM = \$20^{26}$
- $Cost = \frac{2,430,000 \text{ TM members} \times \$20}{1000} = \$48,600$
- MedLink will advertise on WebMD's free app designed for Android and iPhone systems. This app can be accessed from virtually anywhere, allowing for MedLink to conveniently reach the specific niche of doctors who have a smartphone. Advertisements will run throughout the year (refer to the media schedule), making this application effective for **frequency**. The following depicts the layout of WebMD's app:



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<sup>25</sup> Appendix D13

<sup>26</sup> Appendix D13

### WebMD e-Newsletter

- $\text{Cost} = \$1500 \text{ per sponsorship}^{27} \times 4 \text{ sponsorships} = \$6000$
- Frequency: Four sponsorships throughout the year. See media schedule below.
- MedLink is scheduled to sponsor WebMD's quarterly "Health Management Insights" e-newsletter four times throughout the year. This newsletter, targeted to healthcare professionals, offers news on innovative products, event information, and industry trends. Repetitive exposure through multiple sponsorships of the newsletter will encourage awareness of the MedLink brand.

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<sup>27</sup> Appendix D13

## Media Schedule

| 2014                      | January |   | February |   | March |   | April |   | May |   | June |   | July |   | August |   | September |   | October |   | November |   | December |   |   |   |    |    |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |     |
|---------------------------|---------|---|----------|---|-------|---|-------|---|-----|---|------|---|------|---|--------|---|-----------|---|---------|---|----------|---|----------|---|---|---|----|----|-----------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----|
| Week                      | 1       | 2 | 3        | 4 | 1     | 2 | 3     | 4 | 1   | 2 | 3    | 4 | 1    | 2 | 3      | 4 | 1         | 2 | 3       | 4 | 1        | 2 | 3        | 4 | 1 | 2 | 3  | 4  | Frequency |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |     |
| <b>Magazines</b>          |         |   |          |   |       |   |       |   |     |   |      |   |      |   |        |   |           |   |         |   |          |   |          |   |   |   |    |    |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |     |
| O, The Oprah Magazine     | 1       |   |          |   |       |   |       | 1 |     |   |      |   | 1    |   |        |   |           |   |         |   |          |   |          |   |   |   |    | 6  |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |     |
| WebMD the Magazine        | 1       |   |          |   | 1     |   |       | 1 |     |   |      |   |      |   |        |   |           |   |         |   |          |   |          |   |   |   |    | 6  |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |     |
| Better Homes & Gardens    | 1       |   |          |   | 1     |   |       | 1 |     |   | 1    |   |      | 1 |        |   | 1         |   |         | 1 |          | 1 |          | 1 |   |   |    | 12 |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |     |
| <b>Trade Publications</b> |         |   |          |   |       |   |       |   |     |   |      |   |      |   |        |   |           |   |         |   |          |   |          |   |   |   |    |    |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |     |
| Modern Healthcare         | 1       | 1 | 1        | 1 | 1     | 1 | 1     | 1 |     |   |      |   | 1    |   |        | 1 | 1         | 1 | 1       | 1 | 1        | 1 | 1        | 1 | 1 | 1 | 18 |    |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |     |
| Psychology Today          | 1       |   |          | 1 |       |   | 1     |   | 1   |   |      |   | 1    |   |        | 1 |           |   | 1       |   | 1        |   | 1        |   |   |   |    | 12 |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |     |
| <b>Television</b>         |         |   |          |   |       |   |       |   |     |   |      |   |      |   |        |   |           |   |         |   |          |   |          |   |   |   |    |    |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |     |
| TLC                       |         |   |          |   |       |   |       | 1 |     |   |      |   |      |   |        |   | 1         |   |         |   |          |   |          |   |   |   |    | 2  |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |     |
| <b>Internet</b>           |         |   |          |   |       |   |       |   |     |   |      |   |      |   |        |   |           |   |         |   |          |   |          |   |   |   |    |    |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |     |
| WebMD.com                 | 1       | 1 | 1        | 1 | 1     | 1 | 1     | 1 | 1   | 1 | 1    | 1 | 1    | 1 | 1      | 1 | 1         | 1 | 1       | 1 | 1        | 1 | 1        | 1 | 1 | 1 | 1  | 52 |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |     |
| WebMD eNewsletter         | 1       |   |          |   |       |   |       |   |     |   |      |   | 1    |   |        |   |           |   |         |   |          |   |          |   |   |   |    | 4  |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |     |
| WebMD Mobile App          | 1       | 1 | 1        | 1 | 1     | 1 | 1     | 1 | 1   | 1 | 1    | 1 | 1    | 1 | 1      | 1 | 1         | 1 | 1       | 1 | 1        | 1 | 1        | 1 | 1 | 1 | 1  | 52 |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |     |
| <b>TOTAL</b>              | 8       | 2 | 3        | 2 | 6     | 2 | 3     | 2 | 8   | 2 | 3    | 2 | 6    | 2 | 2      | 2 | 5         | 2 | 2       | 2 | 5        | 2 | 2        | 2 | 3 | 3 | 6  | 2  | 2         | 7 | 2 | 4 | 2 | 6 | 2 | 2 | 3 | 5 | 2 | 2 | 2 | 4 | 2 | 2 | 2 | 164 |

## First Year Traditional Media Costs

- Total First Year Traditional Media Costs: \$1,568,653

|                                       |                    |
|---------------------------------------|--------------------|
| ○ Magazines                           |                    |
| ■ O, The Oprah Magazine, 6x:          | \$516,450          |
| ■ WebMD the Magazine, 6x:             | \$347,400          |
| ■ Better Homes & Gardens, 12x:        | \$193,368          |
| ○ Trade Journals                      |                    |
| ■ Modern Healthcare, 18x:             | \$142,830          |
| ■ Psychology Today, 12x:              | \$107,100          |
| ○ Internet                            |                    |
| ■ WebMD.com                           | \$24,300           |
| ■ WebMD eNewsletter, 4x:              | \$6,000            |
| ■ WebMD App                           | \$48,600           |
| ○ Television                          |                    |
| ■ TLC, 2x:                            | <u>\$40,000</u>    |
| <b>Total Traditional Media Costs:</b> | <b>\$1,426,048</b> |
| Production Costs (10%):               | <u>\$142,605</u>   |
| <b>TOTAL BUDGET:</b>                  | <b>\$1,568,653</b> |

### A/S Ratio

Health services industry: 4.5%<sup>28</sup>

$$\text{MedLink A/S Ratio} = \frac{\text{Advertising}}{\text{Forecasted sales}} = \frac{\$1,568,653}{\$23,212,800} = 6.8\%$$

Though MedLink's A/S ratio is higher than the industry standard, this can be justified by the firm requiring a greater than average amount of advertising in order to gain traction as a new entrant to this sector.

### Integration Assessment

In order to fully integrate all aspects of the MedLink brand, all advertisements will feature the MedLink logo and slogan. They will also have a similar professional feel and serious tone to appeal to the target market while preserving a strong brand identity.

Advertisements across the various media platforms will incorporate the campaign theme of "Be there." for consistency and to connect emotional benefits of the service to the target market. Advertisements will reference owned digital media by incorporating the website as a resource for additional information.

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<sup>28</sup> Appendix D14

- Main Logo



- App Logo



- **Tagline:** “Better communication. Better health”
- **Campaign Theme:** “Be there.” This theme will emphasize the importance of communication between doctors and patients through utilization of pathos. Connecting the benefits of MedLink to the designated audience’s emotions will invite them to try and eventually subscribe to the service. A call to action, “Be there.” offers a solution to doctors by identifying with the overall spirit and underlying motivation behind the field. Since many doctors are driven by a selfless desire to help those around them, this message ascertains that MedLink is the tool they can use to maximize their efforts.

- **Colors:** The use of blue and gray in MedLink's logo establishes a feeling of dependability and strength, which is reinforced by the chain linking the "M" and the "L".
  - "M" & Stroke: DARK BLUE - C80, M45, Y15, K0
  - "L": LIGHT BLUE - C52, M10, Y0, K0
  - Chain Link & MedLink wording: GREY - C0, M0, Y0, K50
- **Fonts:** Orbitron will be used in the MedLink logo due to its professional and eye-catching appearance. Lato will be used as the main font throughout MedLink's advertisements, website, and any other areas that require increased amounts of text as it is easy to read and has a clean appearance.
- **URL:** [www.medlinkservice.wordpress.com](http://www.medlinkservice.wordpress.com) (See owned digital media)

## OWNED DIGITAL MEDIA

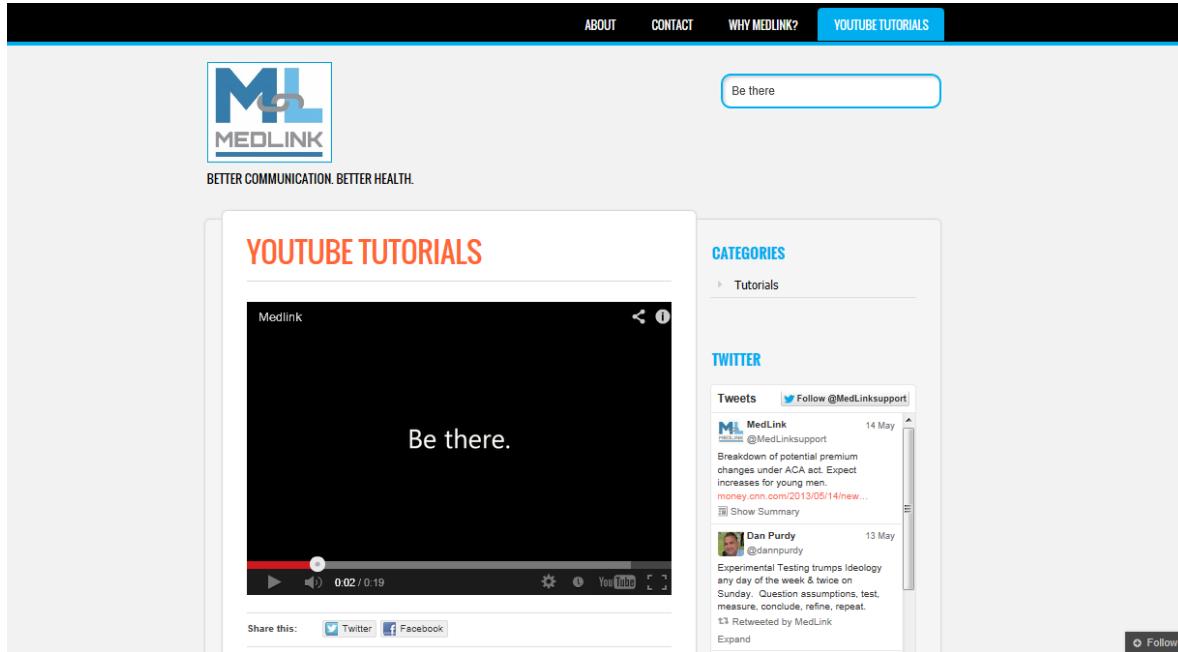
The following outline why MedLink should take advantage of the benefits that arise with effective use of owned digital media:

- MedLink is a product designed for the medical field, and users will have to trust the company with sensitive information. Owned digital media is one way for MedLink to show that it is a legitimate enterprise and **gain social proof**. These are two crucial steps on the path to becoming trusted and accepted.
- Social media has become one of the first places potential customers look at in their search for information. If used correctly, MedLink can **provide value** to these potential users by linking them to relevant information during this phase.
- Owned digital media provides a chance for MedLink to **develop a brand personality** and **engage** with the target market.
- By **integrating the campaign theme** “Be there.” into owned digital media, MedLink can reach a wider audience and increase the frequency that the target market sees the message.
- As a tech product, users will be expecting MedLink to have a solid social media presence. With all new products, **meeting expectations** is very important.
- Providing quality, owned digital media content can **lead to crucial earned media** and endorsements from third parties.
- Interesting and useful content provides the opportunity for **inbound marketing**.

## Media Vehicles

### Website

- [www.medlinkservice.wordpress.com](http://www.medlinkservice.wordpress.com)



- **Integration: central hub for all owned digital media**
  - Live-updating Twitter feed on sidebar
  - Facebook “Like” button on sidebar
  - Blog posts organized in categories on sidebar
  - “YouTube Tutorials” button on header
  - Simultaneous link with app, data and profile viewable online
  - Logo and tagline consistent with all other promotional materials
- **Rationale**
  - Allows for the MedLink service to be accessible anywhere and anytime, supporting the idea driving the “Be there.” campaign theme
  - It removes the smartphone requirement for MedLink service
  - Doctors/users on medical side will have all of their patient MedLink data consolidated in one, easy to find and organized place. Facilitates the viewing of large amounts of data much better than an app
  - A website is a necessary tool to organize all owned digital media in one place
  - Creates an opportunity to reach potential customers online via search engine optimization efforts and inbound marketing
  - Allows MedLink to offer customer support online
  - As a technology and information-heavy product that relies upon the internet and Web 2.0 to facilitate quick transfer of information and

communication between doctors and patients, part of MedLink's reputation will be determined by the effective use of owned digital media; having a quality website presents a professional image of the company

- **Costs<sup>29</sup>**

| Description                     | Cost            |
|---------------------------------|-----------------|
| Domain name registration        | \$18            |
| Website coding, design, hosting | \$15,000        |
| Website maintenance             | \$3,000         |
| <b>TOTAL</b>                    | <b>\$18,018</b> |

- Cost of \$18/year to purchase domain name [www.MedLinkService.com](http://www.MedLinkService.com)<sup>30</sup>
- Budget \$15,000 for the following website modifications:
  - Security
  - Linking with app
  - Profiles
  - Online data storage
  - Intuitive organization and viewing (charts, lists, reports, etc.)
  - Alert system
    - Alerts doctors to potential patient crises
    - Customizable based upon doctor requirements
    - Automated
    - Generate response based upon patient activity and responses
  - Push alerts and rating system: allows doctors to send personalized messages, content, and ask for ratings from patients
  - Maintenance budget of \$250/month

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<sup>29</sup> Appendix E1

<sup>30</sup> Appendix E2

## Twitter

- [www.twitter.com/MedLinkSupport](http://www.twitter.com/MedLinkSupport)

The screenshot shows the Twitter profile page for @MedLinksupport. At the top, there's a logo consisting of a stylized 'ML' in blue and white, with the word 'MEDLINK' in a smaller font below it. Below the logo, the handle '@MedLinksupport' is displayed, followed by the tagline 'Better communication. Better health.' and the location 'Bellingham, WA · medlinkservice.wordpress.com'. Underneath this header, there are three status indicators: '4 TWEETS', '81 FOLLOWING', and '12 FOLLOWERS'. To the right of these indicators is a small envelope icon. The main section is titled 'Tweets' and contains two entries. The first tweet is from 'MedLink @MedLinksupport' dated '14 May', which reads: 'Breakdown of potential premium changes under ACA act. Expect increases for young men. [money.cnn.com/2013/05/14/new...](http://money.cnn.com/2013/05/14/new...)' with a link icon and a 'View summary' link. The second tweet is from 'Dan Purdy @dannpurdy' dated '13 May', which reads: 'Experimental Testing trumps Ideology any day of the week & twice on Sunday. Question assumptions, test, measure, conclude, refine, repeat.' with a retweet icon and a 'Retweeted by MedLink' note.

- **Rationale**

- Twitter has a large, established user base. Not only is it home to more than 554,750,000 active users, but it is also growing at a rate of approximately 135,000 new users per day.<sup>31</sup> Twitter provides an opportunity for MedLink to connect with potential customers, current users, and a wide variety of interested people.
- Twitter provides an opportunity for MedLink to show that there are real people behind the brand. Although MedLink must be careful with what is posted and cognizant of the potential negative consequences that can come from inappropriate tweets, tweeting remains a great way to give brands personalities and show customers that they are interacting with real people.
- Twitter can be used to monitor user satisfaction with MedLink, resolve customer issues as they occur, and gain valuable feedback about customer sentiment and experience with regards to the service.
- Engaging with users on multiple platforms builds relationships and relationships lead to brand loyalty.

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<sup>31</sup> Appendix E3

- Posting quality and relevant information on Twitter will demonstrate that MedLink is on top of industry trends and attract followers who may be interested in MedLink.
- Tweets have the potential to go viral because of the retweet system, leading to increased publicity.
- **Costs:** N/A, the MedLink Twitter will be maintained in house.

## Facebook

- [www.facebook.com/medlinkservice](http://www.facebook.com/medlinkservice)



- **Rationale**

- The Facebook fan page will allow for interactions with a large number of consumers, the patients using MedLink, and is easily integrated with the pull strategy portion of the campaign.
- MedLink can use Facebook to observe, interact with, and learn more about the target market and what they are looking for from the service.
- Maintaining an active Facebook page will help meet SEO goals and bring traffic to other owned digital media.
- Facebook provides MedLink with another place to offer customer support and react quickly to problems.
- Like Twitter, Facebook gives MedLink an opportunity to humanize the company.
- Linking to owned content like blog posts and YouTube tutorials increases the chance of the content going viral and extends reach.
- **Costs:** N/A, the MedLink Facebook will be maintained in house.

## MedLink App

- **Rationale**

- The MedLink app is a part of the value proposition for both patients and medical professionals. Patients get all of their medical information and current treatment plan stored in one convenient place, and doctors get a chance to have a direct connection with all of their patients.
- Integration between the app and the main website.
- In line with campaign theme of “Be there.”

- **Costs<sup>32</sup>**

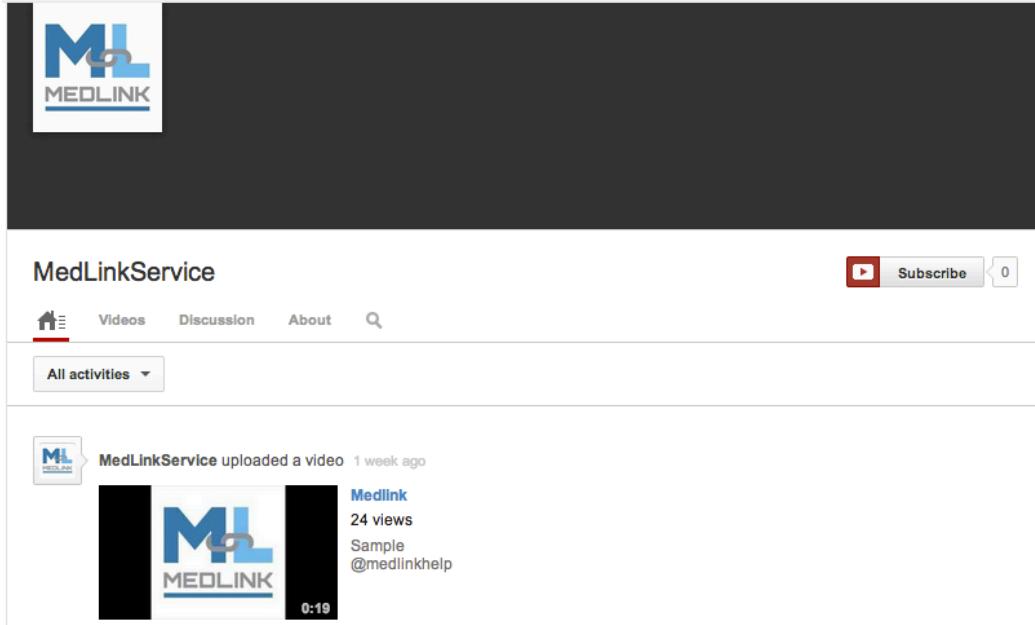
| Description                     | Cost             |
|---------------------------------|------------------|
| Basic design                    | \$60,000         |
| Web services                    | \$5,000          |
| iPad + iPhone version           | \$20,000         |
| Android, Windows phone versions | \$40,000         |
| App store fee                   | \$99             |
| <b>TOTAL</b>                    | <b>\$125,099</b> |

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<sup>32</sup> Appendix E4

## YouTube

- <https://www.youtube.com/MedLinkService>



- **Rationale**

- Video is a rich communication media
- Tutorials educate users about the product and videos can increase number of those within the target market that move from awareness to knowledge
- Videos have a possibility to go viral
- There are different learning styles; some users may benefit more from the visual aids and audio in the tutorials
- Creation of quality content is the first step to effective SEO and inbound marketing

- **Costs<sup>33</sup>**

| Description  | Cost           |
|--------------|----------------|
| Hosting      | Free           |
| Equipment    | \$1,500        |
| <b>TOTAL</b> | <b>\$1,500</b> |

- Hosting is free on YouTube
- Equipment budget includes video camera, microphone, tripod, and related equipment

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<sup>33</sup> Appendix E5

## **LinkedIn**

MedLink can use LinkedIn to connect with medical professionals and selectively communicate with influencers and a smaller group of knowledgeable people from the target market. Although there may be fewer interactions on LinkedIn, they will be of higher quality. MedLink could participate in groups comprised mainly of medical professionals on LinkedIn, which would lead to a better understanding of what features are useful and needed. It will also give MedLink a chance to show that they are a legitimate company and both knowledgeable and willing to learn about the healthcare industry.

**Total Costs for Owned Digital Media**

| Description                     | Cost             |
|---------------------------------|------------------|
| Domain name registration        | \$18             |
| Website coding, design          | \$15,000         |
| Website maintenance             | \$3,000          |
| Basic design                    | \$60,000         |
| Web services                    | \$5,000          |
| iPad + iPhone version           | \$20,000         |
| Android, Windows phone versions | \$40,000         |
| App store fee                   | \$99             |
| Equipment                       | \$1,500          |
| <b>TOTAL</b>                    | <b>\$144,617</b> |

## DIRECT MARKETING

**Objective:** MedLink will execute an array of direct marketing approaches targeted toward doctors throughout 2014 to achieve an awareness rate of 80 percent. The selected approaches will allow MedLink to reach many professionals within the industry nationwide while gaining immediate and measureable results. These direct marketing methods will be integrated by using the same logo, slogan, colors, and contact information.

- **E-blasts:** MedLink will send out customized emails devoted solely to reaching medical professionals. This allows MedLink to focus specifically on the target market by selecting key demographics, including specialties, job titles, and locations the company wishes to reach. MedLink will purchase a list of 500,000 email addresses to execute ADVANCE healthcare e-blast services.
- **E-Newsletters:** MedLink is scheduled to run in *Executive Insight*, a weekly e-newsletter managed by ADVANCE healthcare that targets healthcare executives. Each newsletter will contain the latest news, articles, and information about special medical features posted on their website. Repetitive exposure will help increase awareness of the brand within the target market. MedLink will implement leaderboard e-newsletters over the course of the year. The leaderboard ad is 728 by 90 pixels and will appear at the top of every newsletter. This includes a link to MedLink's site, which will help direct potential subscribers to MedLink.
- **Business cards:** MedLink will use business cards as a means of direct marketing due to the fact that they evoke a direct response from the individual given the card. This will aid personal selling teams in the formation of long-term relationships with doctors, and integrate MedLink's owned digital media into direct marketing.



## Costs<sup>34</sup>

| Type                       | Individual Price | Quantity | Total     |
|----------------------------|------------------|----------|-----------|
| E-Newsletter               | \$862            | 52 weeks | \$44,824  |
| E-Blasts                   | \$0.21           | 500,000  | \$105,000 |
| Business Cards             | ---              | 5,000    | \$80.45   |
| <b>Total:</b> \$149,904.45 |                  |          |           |

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<sup>34</sup> Appendix F1

## PUBLIC RELATIONS

**Objective:** To aid the awareness rate of 80 percent and develop MedLink's reputation through a press release outlining the company's new partnership with a recognized ACO.

**When:** June 30, 2014

**Cost:** \$0. After developing relationships with several noteworthy journalists, the press release will be publicized free of charge as earned media.

**Integration:** By including a link to MedLink's website, several owned digital media sources will be integrated into the press release (see below).



Contact: Chase Tan, PR Director

Tel: (360) 555-5555

Email: ChaseTan@medlinkservice.com

FOR IMMEDIATE RELEASE

## MEDLINK ANNOUNCES PARTNERSHIP WITH HEALTHCARE PARTNERS MEDICAL GROUP

California-based ACO Plans to Introduce Service Immediately

BELLINGHAM, WA—MedLink announced earlier today a new partnership with Healthcare Partners Medical Group. The accountable care organization is based in Torrance, California and employs more than 1,200 primary care physicians and 30,000 employed and contracted specialists. This new partnership will reportedly result in more than 5,000 new subscriptions – a number that could easily increase as the system becomes fully integrated.

This is MedLink's largest partnership announced to date. MedLink CEO Shayna Dahmen has indicated that there may be similar announcements on the horizon. "We are very excited about the chance to partner with a great organization like Healthcare Partners Medical Group. MedLink is committed to helping organizations like this attain the highest quality of care possible while surpassing ACO guidelines," said Dahmen. "We hope that this is the first of many similar partnerships to come."

The medical group has expressed positive thoughts regarding the partnership. Robert Margolis, Co-Chairman of the board at Healthcare Partners Medical stated that he was "very impressed with MedLink's interface and look[s] forward to integrating [MedLink's] services into [the] practice. Feedback from physicians has been overwhelmingly positive."

A livecast will be available online at [www.medlinkservice.com](http://www.medlinkservice.com) tomorrow at 1:00pm PST.

Established in 2013, MedLink provides a wide variety of services to medical practices, including care coordination and tools for communication between patients and doctors. MedLink works closely with practices to help them achieve the highest quality of treatment possible while surpassing ACO guidelines.

For more information about this topic, or to schedule an interview, please call Chase Tan at (360) 555-5555 or e-mail Chase at [ChaseTan@medlinkservice.com](mailto:ChaseTan@medlinkservice.com).

## EVENT SPONSORSHIP

MedLink will become a “Diamond Grantor” at the Accountable Care Organization Summit in Washington, DC. This includes, but is not limited to:<sup>35</sup>

- Exclusive recognition on conference brochure cover and home page of the conference website
- Choice of two advertising items and/or events such as: Exclusive Signage at Continental Breakfast, Break, Luncheon and Cyber Café and Exclusive Logo on Calculators, Conference Portfolio, or any combination of your choosing (up to \$12,000 value)
- Hosting of an invitation-only dinner
- Full-page four color advertisement or corporate profile handed out to each attendee with conference portfolio

This conference will give MedLink the opportunity to meet with potential subscribers, generate positive publicity, and connect with established accountable care organizations. The sponsorship will integrate support media by providing specialty items to conference attendees.

**Objective:** To increase awareness of the MedLink brand to 80 percent through sponsorship of the Accountable Care Organization Summit while connecting with industry professionals within the target market.

**When:** June 11-13, 2014

**Cost:** \$100,000

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<sup>35</sup> Appendix F2

## SUPPORT MEDIA

MedLink has chosen not to focus efforts on outdoor and transit media because these outlets are too broad for MedLink's very specific target market. That being said, specialty items will be beneficial to establish awareness by reminding doctors about the brand and potentially serving as a conversation tool between medical professionals, promoting increased word of mouth communication.

**Objective:** Achieve the goal of 80 percent awareness of MedLink through repetition by providing specialty items that remind medical professionals about the company.

**Costs<sup>36</sup>**

| Type                  | Individual Price | Quantity | Total   |
|-----------------------|------------------|----------|---------|
| Tote bags             | \$6.35           | 500      | \$3,175 |
| T-shirts              | \$5.22           | 500      | \$2,610 |
| Mugs                  | \$3.67           | 500      | \$1,835 |
| <b>Total: \$7,620</b> |                  |          |         |

**Integration:** The MedLink logo will be placed on tote bags, t-shirts, and mugs that are distributed to conference attendees. These items will be given out at the event sponsored by MedLink to serve as a reminder to the target market about MedLink every time they use the branded item. Sales teams may also distribute these items to offices during presentations. This will promote awareness and potentially spark conversations about MedLink, creating positive word of mouth amongst medical professionals.



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<sup>36</sup> Appendix F3

## Example of MedLink brochure to be given out at the conference:



Too often a patient comes in unable to effectively communicate their symptoms or remember pertinent medical information. This can become an issue when trying to find the proper treatment. We simply strive to bridge this by bringing the patient-doctor relationship to the next level; allowing for better treatment and an easier overall experience. With MedLink, doctors will be able to:

- Remind users of upcoming appointments, daily treatment tasks, and prescription refills
- Get feedback from patients about the effectiveness of their treatment plan
- See entire medical history
- Achieve ACO metrics by tracking quality of care

516 High Street  
Bellingham, WA, 98225  
253.548.4160 ph  
253.548.4161 fax  
[www.medlink.com](http://www.medlink.com)

**Better communication.  
Better health.**

*Bridge the communication gap between doctors and patients*



### MEDLINK PRICING

MedLink is priced at **\$200 a month per doctor**.

There is no limit to the amount of patients a doctor can have, and users can cancel service at any time. MedLink is the prime option for any medical professional, and with an average cost \$50 less than competitors, it's the superior choice in connecting patients to doctors.



### PUSH NOTIFICATIONS

Reminds patients of upcoming appointments, daily treatment tasks, and prescription refills. This helps the patient stay organized and top of treatment.



### PATIENT HEALTH RATINGS

These ratings provide doctors with feedback on the effectiveness of their treatment plan by allowing them to gain insight on how the patient is feeling post appointment.



### MEDICAL RECORDS

All of the patient's medical records are conveniently consolidated in one place. There is no need to ask the patient in depth medical questions they may not have answers for, as it's all available at the click of a button.

## SALES PROMOTION

**Objective:** To encourage subscription purchase and a usage rate of two percent by the target market, MedLink will waive all setup costs for the first year.

**Cost:** \$0

**Integration:** To help reduce promotional costs, MedLink will integrate email addresses from these free subscriptions in its direct marketing approaches such as e-blasts and e-newsletters.

Though MedLink will lose these revenues, this will allow for the creation of long-term relationships and subscriptions. This short-term sacrifice will benefit the company by removing barriers that could prevent doctors from subscribing.

## EVALUATION OF PROMOTIONAL PLAN

### **Press Release**

When the press release regarding the partnership with an ACO is sent out, a link to the MedLink website will be included. The press release will notify readers that a livecast of a future conference call will be available on the website on the following day. Unique visitors to the website on the day of the livecast will be compared to the daily average.

### **Event Sponsorship**

MedLink hopes to reach new subscribers through sponsorship and participation in the ACO summit. Comparing revenue generated from the leads gained during the summit with the cost of sponsorship is the primary way that MedLink will evaluate the effectiveness of the event sponsorship. Customer resource management software will help MedLink keep track of where sales leads came from. MedLink will also attempt to measure increase in awareness due to the event sponsorship by including a question about where subscribers heard about MedLink on the online registration form.

### **Print and TV Advertisements**

MedLink will measure the effectiveness that different advertisements had in creating awareness and leading to use by asking where subscribers heard about MedLink in an online registration form. Besides helping pinpoint which advertisement led to the most registrations, this data can be used to compare sales revenue versus advertisement cost and measure ROI.

### **Online Banner Ads and Mobile App Ads**

Effectiveness will be measured by placing code in the ads that indicates which ad was viewed when clicked and the location of the ad. This will allow MedLink to pinpoint which designs generated the most interest and which locations led to the most clicks.

### **Sales Promotions**

As eClinicalWorks does not charge setup costs, MedLink offers a setup fee waiver to all new customers to maintain the competitive pricing model. This sales promotion will not be directly evaluated since waiving setup fees is an industry standard.

## PROMOTION BUDGET

MedLink will implement an **objective and task budgeting method**. This technique is paramount because it synthesizes each of the specific steps involved in the marketing plan, ultimately providing an accurate budget. Based off of the projected revenues for the first year, MedLink's budget ceiling is:  $20\% \times \$23,212,800 = \$4,642,560$ .

### IMC Budget

|  |                       |
|--|-----------------------|
| ● Media                                |                       |
| ○ Television:                          | \$40,000              |
| ○ Print:                               | \$1,307,148           |
| ○ Internet:                            | \$78,900              |
| ○ Production Costs (10%):              | \$142,605             |
| ● Owned Digital Media                  | \$144,617             |
| ● Direct Marketing                     | \$149,904.45          |
| ● Public Relations & Event Sponsorship | \$100,000             |
| ● Support Media                        | \$7,620               |
| ● Sales Promotion                      | \$0                   |
| <b>TOTAL BUDGET:</b>                   | <b>\$1,970,794.45</b> |

The total IMC budget is 8.5 percent of projected first year revenue:

$$\frac{\text{Total budget}}{\text{Forecasted sales}} = \frac{\$1,970,974.45}{\$23,212,800} = 8.5\%$$

### A/S Ratio

MedLink's ratio is higher than the industry standard of 4.5%, which can be attributed to the fact that MedLink is a new company and will therefore have to spend a considerable amount on advertising to break through and gain relevancy. Furthermore, MedLink is one of the first companies offering this type of service. One of the challenges that will arise with the creation of a new category is to generate awareness of the category in general.

$$\text{MedLink A/S Ratio} = \frac{\text{Advertising}}{\text{Forecasted sales}} = \frac{\$1,568,653}{\$23,212,800} = 6.8\%$$

### Share of Voice

$$\text{MedLink SOV} = \frac{\text{MedLink advertising}}{\text{Total category advertising}} = \frac{\$1,568,653}{\$58,500,000^{37} + \$1,568,653} = 2.6\%$$

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<sup>37</sup> Appendix G1

## Appendix A – Segmentation

### A1 – MediaMark Medical Professionals/Healthcare Providers

|    |                            |  |        |       |     |      |     |
|----|----------------------------|--|--------|-------|-----|------|-----|
| 7  | Total                      |  | 230416 | 10517 | 4.6 | 100  | 100 |
| 8  | Men                        |  | 111472 | 2258  | 2   | 21.5 | 44  |
| 9  | Women                      |  | 118944 | 8259  | 6.9 | 78.5 | 152 |
| 10 | Magazines I (Heavy)        |  | 46055  | 2900  | 6.3 | 27.6 | 138 |
| 11 | Magazines II               |  | 46099  | 2376  | 5.2 | 22.6 | 113 |
| 12 | Magazines III              |  | 46095  | 2104  | 4.6 | 20   | 100 |
| 13 | Magazines IV               |  | 46074  | 1753  | 3.8 | 16.7 | 83  |
| 14 | Magazines V (Light)        |  | 46092  | 1384  | 3   | 13.2 | 66  |
| 15 | Newspaper I (Heavy)        |  | 46101  | 2047  | 4.4 | 19.5 | 97  |
| 16 | Newspaper II               |  | 46092  | 2647  | 5.7 | 25.2 | 126 |
| 17 | Newspaper III              |  | 46075  | 2271  | 4.9 | 21.6 | 108 |
| 18 | Newspaper IV               |  | 46083  | 1646  | 3.6 | 15.7 | 78  |
| 19 | Newspaper V (Light)        |  | 46064  | 1905  | 4.1 | 18.1 | 91  |
| 20 | Radio I (Heavy)            |  | 46099  | 2781  | 6   | 26.4 | 132 |
| 21 | Radio II                   |  | 46078  | 2146  | 4.7 | 20.4 | 102 |
| 22 | Radio III                  |  | 46087  | 2598  | 5.6 | 24.7 | 124 |
| 23 | Radio IV                   |  | 46073  | 1856  | 4   | 17.7 | 88  |
| 24 | Radio V (Light)            |  | 46080  | 1136  | 2.5 | 10.8 | 54  |
| 25 | TV (total) I (Heavy)       |  | 46047  | 1113  | 2.4 | 10.6 | 53  |
| 26 | TV (total) II              |  | 46085  | 1967  | 4.3 | 18.7 | 94  |
| 27 | TV (total) III             |  | 46087  | 2518  | 5.5 | 23.9 | 120 |
| 28 | TV (total) IV              |  | 46109  | 2681  | 5.8 | 25.5 | 127 |
| 29 | TV (total) V (Light)       |  | 46088  | 2238  | 4.9 | 21.3 | 106 |
| 30 | Internet I (Heavy)         |  | 46104  | 2207  | 4.8 | 21   | 105 |
| 31 | Internet II                |  | 46086  | 2311  | 5   | 22   | 110 |
| 32 | Internet III               |  | 46070  | 2880  | 6.3 | 27.4 | 137 |
| 33 | Internet IV                |  | 46089  | 2091  | 4.5 | 19.9 | 99  |
| 34 | TV (Prime time) I (Heavy)  |  | 46093  | 2368  | 5.1 | 22.5 | 113 |
| 42 | TV (Prime time) III        |  | 46093  | 2368  | 5.1 | 22.5 | 113 |
| 43 | TV (Prime time) IV         |  | 46097  | 2172  | 4.7 | 20.7 | 103 |
| 44 | TV (Prime time) V (Light)  |  | 46069  | 2131  | 4.6 | 20.3 | 101 |
| 45 | TV (Prime time) VI (Light) |  | 46110  | 540   | 0.0 | 0.0  | 47  |

## A2 - MediaMark 6 + doctor visits in the last 12 months

|    | A                            | B                                | C          | D         | E          | F        | G     |
|----|------------------------------|----------------------------------|------------|-----------|------------|----------|-------|
| 1  |                              | Fall 2011 Product: Personal Care |            |           |            |          |       |
| 2  |                              | Doctor Visits                    |            |           |            |          |       |
| 3  |                              | Visited in Last 12 Months Total  |            |           |            |          |       |
| 4  |                              | Adults                           |            |           |            |          |       |
| 5  |                              |                                  | Total '000 | Proj '000 | Pct Across | Pct Down | Index |
| 6  |                              |                                  |            |           |            |          |       |
| 7  | Total                        |                                  | 230416     | 176107    | 76.4       | 100      | 100   |
| 8  | Men                          |                                  | 111472     | 77445     | 69.5       | 44       | 91    |
| 9  | Women                        |                                  | 118944     | 98661     | 82.9       | 56       | 109   |
| 10 | Educ: Graduated college plus |                                  | 62874      | 51750     | 82.3       | 29.4     | 108   |
| 11 | Educ: Attended college       |                                  | 44620      | 33623     | 75.4       | 19.1     | 99    |
| 12 | Educ: Graduated high school  |                                  | 71520      | 54226     | 75.8       | 30.8     | 99    |
| 13 | Educ: Did not graduate HS    |                                  | 31650      | 20798     | 65.7       | 11.8     | 86    |
| 14 | Educ: Post graduate          |                                  | 21703      | 18249     | 84.1       | 10.4     | 110   |
| 15 | Educ: No college             |                                  | 103170     | 75024     | 72.7       | 42.6     | 95    |
| 16 | Age: 18-24                   |                                  | 29441      | 18823     | 63.9       | 10.7     | 84    |
| 17 | Age: 25-34                   |                                  | 41294      | 28550     | 69.1       | 16.2     | 90    |
| 18 | Age: 35-44                   |                                  | 40658      | 29587     | 72.8       | 16.8     | 95    |
| 19 | Age: 45-54                   |                                  | 44642      | 34532     | 77.4       | 19.6     | 101   |
| 20 | Age: 55-64                   |                                  | 35570      | 29944     | 84.2       | 17       | 110   |
| 21 | Age: 65+                     |                                  | 38811      | 34671     | 89.3       | 19.7     | 117   |
| 22 | Adults 18-34                 |                                  | 70735      | 47373     | 67         | 26.9     | 88    |
| 23 | Adults 18-49                 |                                  | 134052     | 94253     | 70.3       | 53.5     | 92    |
| 24 | Adults 25-54                 |                                  | 126594     | 92669     | 73.2       | 52.6     | 96    |
| 25 | Men 18-34                    |                                  | 35612      | 20086     | 56.4       | 11.4     | 74    |
| 26 | Men 18-49                    |                                  | 66875      | 40965     | 61.3       | 23.3     | 80    |

### A3 – MediaMark Smartphone Users

|    | A   | B   | C         | D             | E           | F     | G |
|----|---|---|-----------|---------------|-------------|-------|---|
| 1  |   | Fall 2011 Product: Electronics<br>Cellular/Mobile Phones/Smartphones<br>Have a Smartphone<br>Adults |           |               |             |       |   |
| 5  |   | Total<br>'000   | Proj '000 | Pct<br>Across | Pct<br>Down | Index |   |
| 6  |   |   |           |               |             |       |   |
| 10 | Educ: Graduated college plus                      | 62874   | 31290     | 49.8          | 35.7        | 131   |   |
| 11 | Educ: Attended college                            | 44620   | 19502     | 43.7          | 22.3        | 115   |   |
| 12 | Educ: Graduated high school                       | 71520   | 21453     | 30            | 24.5        | 79    |   |
| 13 | Educ: Did not graduate HS                         | 31650   | 7273      | 23            | 8.3         | 60    |   |
| 14 | Educ: Post graduate                               | 21703   | 10737     | 49.5          | 12.3        | 130   |   |
| 15 | Educ: No college                                  | 103170  | 28726     | 27.8          | 32.8        | 73    |   |
| 16 | Age: 18-24  | 29441   | 17065     | 58            | 19.5        | 153   |   |
| 17 | Age: 25-34  | 41294   | 24191     | 58.6          | 27.6        | 154   |   |
| 18 | Age: 35-44  | 40658   | 20149     | 49.6          | 23          | 130   |   |
| 19 | Age: 45-54  | 44642   | 15638     | 35            | 17.9        | 92    |   |
| 20 | Age: 55-64  | 35570   | 7890      | 22.2          | 9           | 58    |   |
| 21 | Age: 65+  | 38811   | 2637      | 6.8           | 3           | 18    |   |
| 22 | Adults 18-34                                      | 70735   | 41255     | 58.3          | 47.1        | 153   |   |
| 23 | Adults 18-49                                      | 134052  | 69998     | 52.2          | 79.9        | 137   |   |
| 24 | Adults 25-54                                      | 126594  | 59978     | 47.4          | 68.5        | 125   |   |
| 25 | Men 18-34   | 35612   | 20612     | 57.9          | 23.5        | 152   |   |
| 26 | Men 18-49   | 66875   | 34647     | 51.8          | 39.6        | 136   |   |
| 27 | Men 25-54   | 62732   | 29734     | 47.4          | 34          | 125   |   |
| 28 | Women 18-34                                       | 35123   | 20643     | 58.8          | 23.6        | 155   |   |
| 29 | Women 18-49                                       | 67177   | 35351     | 52.6          | 40.4        | 138   |   |
| 30 | Women 25-54                                       | 63862   | 30244     | 47.4          | 34.5        | 125   |   |
| 31 | Occupation: Professional and Related Occupations  | 30801   | 16604     | 53.9          | 19          | 142   |   |
| 32 | Occupation: Management, Business and Financial    | 21414   | 12581     | 58.8          | 14.4        | 155   |   |
| 33 | Occupation: Sales and Office Occupations          | 32347   | 16120     | 49.8          | 18.4        | 131   |   |
| 34 | Occupation: Natural Resources, Construction and M | 12894   | 5093      | 39.5          | 5.8         | 104   |   |
| 35 | Occupation: Other employed                        | 40217   | 16722     | 41.6          | 19.1        | 109   |   |
| 36 | HHI: 150,000+                                     | 23190   | 13785     | 59.4          | 15.7        | 156   |   |
| 37 | HHI: \$75,000-\$149,999                           | 65125   | 31698     | 48.7          | 36.2        | 128   |   |
| 38 | HHI: \$60,000-\$74,999                            | 25140   | 9627      | 38.3          | 11          | 101   |   |
| 39 | HHI: \$50,000-\$59,999                            | 19101   | 7285      | 38.1          | 8.3         | 100   |   |
| 40 | HHI: \$40,000-\$49,999                            | 20210   | 6676      | 33            | 7.6         | 87    |   |

|    |  |                                    |               |           |               |             |       |
|----|--|------------------------------------|---------------|-----------|---------------|-------------|-------|
| 1  |  | Fall 2011 Product: Electronics     |               |           |               |             |       |
| 2  |  | Cellular/Mobile Phones/Smartphones |               |           |               |             |       |
| 3  |  | Have a Smartphone                  |               |           |               |             |       |
| 4  |  | Adults                             |               |           |               |             |       |
| 5  |  |                                    | Total<br>'000 | Proj '000 | Pct<br>Across | Pct<br>Down | Index |
| 6  |  |                                    |               |           |               |             |       |
| 40 | HHI: \$40,000-\$49,999                             |                                    | 20210         | 6676      | 33            | 7.6         | 87    |
| 41 | HHI: \$30,000-\$39,999                             |                                    | 22680         | 6063      | 26.7          | 6.9         | 70    |
| 42 | HHI: \$20,000-\$29,999                             |                                    | 23130         | 5559      | 24            | 6.3         | 63    |
| 43 | HHI: <\$20,000                                     |                                    | 31841         | 6877      | 21.6          | 7.9         | 57    |
| 44 | Census Region: North East                          |                                    | 42073         | 15941     | 37.9          | 18.2        | 100   |
| 45 | Census Region: South                               |                                    | 85319         | 33932     | 39.8          | 38.7        | 105   |
| 46 | Census Region: Midwest                             |                                    | 50234         | 16455     | 32.8          | 18.8        | 86    |
| 47 | Census Region: West                                |                                    | 52791         | 21243     | 40.2          | 24.3        | 106   |
| 48 | MediaMarkets: Top 5                                |                                    | 48318         | 21288     | 44.1          | 24.3        | 116   |
| 49 | MediaMarkets: Next 5                               |                                    | 23432         | 10678     | 45.6          | 12.2        | 120   |
| 50 | County Size: A                                     |                                    | 95063         | 42036     | 44.2          | 48          | 116   |
| 51 | County Size: B                                     |                                    | 70099         | 26966     | 38.5          | 30.8        | 101   |
| 52 | County Size: C                                     |                                    | 33501         | 11065     | 33            | 12.6        | 87    |
| 53 | County Size: D                                     |                                    | 31752         | 7503      | 23.6          | 8.6         | 62    |
| 54 | Marital Status: Never Married                      |                                    | 61869         | 32119     | 51.9          | 36.7        | 137   |
| 55 | Marital Status: Now Married                        |                                    | 124761        | 44793     | 35.9          | 51.2        | 94    |
| 56 | Marital Status: Engaged                            |                                    | 11084         | 6072      | 54.8          | 6.9         | 144   |
| 57 | Marital Status: Widowed*/Divorced*/Separated (lega |                                    | 43787         | 10658     | 24.3          | 12.2        | 64    |
| 58 | Child Age: <12 months                              |                                    | 9500          | 5064      | 53.3          | 5.8         | 140   |
| 59 | Child age: 12-23 months                            |                                    | 8495          | 3951      | 46.5          | 4.5         | 122   |
| 60 | Child age: <2 years                                |                                    | 17482         | 8781      | 50.2          | 10          | 132   |
| 61 | Child age: <6 Years                                |                                    | 42809         | 21562     | 50.4          | 24.6        | 133   |
| 62 | Child age: 2 - 5 Years                             |                                    | 32943         | 16529     | 50.2          | 18.9        | 132   |
| 63 | Child age: 6 - 11 Years                            |                                    | 41976         | 20455     | 48.7          | 23.4        | 128   |
| 64 | Child age: 12 - 17 Years                           |                                    | 46071         | 20110     | 43.7          | 23          | 115   |
| 65 | Years At Present Address: <1 year                  |                                    | 37652         | 19019     | 50.5          | 21.7        | 133   |
| 66 | Years At Present Address: 1-4 Years                |                                    | 63159         | 28514     | 45.1          | 32.6        | 119   |
| 67 | Years At Present Address: 5+ Years                 |                                    | 129605        | 40037     | 30.9          | 45.7        | 81    |
| 68 | Home: Owned  |                                    | 158235        | 56771     | 35.9          | 64.8        | 94    |
| 69 | Home Value: \$500,000+ Dollars                     |                                    | 14619         | 6973      | 47.7          | 8           | 126   |
| 70 | Home Value: \$200,000-\$400,000                    |                                    | 60003         | 21750     | 41.2          | 28.3        | 108   |

|     | A  | B   | C         | D             | E           | F     | G | H |
|-----|--|---|-----------|---------------|-------------|-------|---|---|
| 1   |  | Fall 2011 Product: Electronics<br>Cellular/Mobile Phones/Smartphones<br>Have a Smartphone<br>Adults |           |               |             |       |   |   |
| 5   |  | Total<br>'000   | Proj '000 | Pct<br>Across | Pct<br>Down | Index |   |   |
| 6   |  |   |           |               |             |       |   |   |
| 76  | Race: American Indian or Alaska Native       | 2522  | 931       | 36.9          | 1.1         | 97    |   |   |
| 77  | Race: Asian                                  | 7363  | 3604      | 48.9          | 4.1         | 129   |   |   |
| 78  | Race: Other                                  | 21850   | 8563      | 39.2          | 9.8         | 103   |   |   |
| 79  | Race: White only                             | 172794  | 62370     | 36.1          | 71.2        | 95    |   |   |
| 80  | Race: Black/African American only            | 25976   | 12095     | 46.6          | 13.8        | 123   |   |   |
| 81  | Race: Other Race/Multiple Classifications    | 31646   | 13105     | 41.4          | 15          | 109   |   |   |
| 82  | Spanish spoken in home (most often or other) | 35158   | 13757     | 39.1          | 15.7        | 103   |   |   |
| 83  | Quintile Magazines I (Heavy)                 | 46055   | 21618     | 46.9          | 24.7        | 124   |   |   |
| 84  | Quintile Magazines II                        | 46099   | 19920     | 43.2          | 22.7        | 114   |   |   |
| 85  | Quintile Magazines III                       | 46095   | 17135     | 37.2          | 19.6        | 98    |   |   |
| 86  | Quintile Magazines IV                        | 46074   | 16005     | 34.7          | 18.3        | 91    |   |   |
| 87  | Quintile Magazines V (Light)                 | 46092   | 12892     | 28            | 14.7        | 74    |   |   |
| 88  | Quintile Newspaper I (Heavy)                 | 46101   | 14568     | 31.6          | 16.6        | 83    |   |   |
| 89  | Quintile Newspaper II                        | 46092   | 17728     | 38.5          | 20.2        | 101   |   |   |
| 90  | Quintile Newspaper III                       | 46075   | 19108     | 41.5          | 21.8        | 109   |   |   |
| 91  | Quintile Newspaper IV                        | 46083   | 18025     | 39.1          | 20.6        | 103   |   |   |
| 92  | Quintile Newspaper V (Light)                 | 46064   | 18141     | 39.4          | 20.7        | 104   |   |   |
| 93  | Quintile Radio I (Heavy)                     | 46099   | 18534     | 40.2          | 21.2        | 106   |   |   |
| 94  | Quintile Radio II                            | 46078   | 19646     | 42.6          | 22.4        | 112   |   |   |
| 95  | Quintile Radio III                           | 46087   | 19895     | 43.2          | 22.7        | 114   |   |   |
| 96  | Quintile Radio IV                            | 46073   | 16828     | 36.5          | 19.2        | 96    |   |   |
| 97  | Quintile Radio V (Light)                     | 46080   | 12667     | 27.5          | 14.5        | 72    |   |   |
| 98  | Quintile TV (total) I (Heavy)                | 46047   | 11513     | 25            | 13.1        | 66    |   |   |
| 99  | Quintile TV (total) II                       | 46085   | 16032     | 34.8          | 18.3        | 92    |   |   |
| 100 | Quintile TV (total) III                      | 46087   | 17865     | 38.8          | 20.4        | 102   |   |   |
| 101 | Quintile TV (total) IV                       | 46109   | 20601     | 44.7          | 23.5        | 118   |   |   |
| 102 | Quintile TV (total) V (Light)                | 46088   | 21559     | 46.8          | 24.6        | 123   |   |   |
| 103 | Quintile Internet I (Heavy)                  | 46104   | 24857     | 53.9          | 28.4        | 142   |   |   |
| 104 | Quintile Internet II                         | 46086   | 23024     | 50            | 26.3        | 131   |   |   |
| 105 | Quintile Internet III                        | 46070   | 20301     | 44.1          | 23.2        | 116   |   |   |
| 106 | Quintile Internet IV                         | 46089   | 12232     | 26.5          | 14          | 70    |   |   |
| 107 | Quintile Internet V (Light)                  | 46068   | 7156      | 15.5          | 8.2         | 41    |   |   |
| 108 | Quintile Outdoor I (Heavy)                   | 46118   | 21574     | 46.8          | 24.6        | 123   |   |   |
| 109 | Quintile Outdoor II                          | 46089   | 20145     | 43.7          | 23          | 115   |   |   |
| 110 | Quintile Outdoor III                         | 46081   | 17449     | 37.9          | 19.9        | 100   |   |   |
| 111 | Quintile Outdoor IV                          | 46062   | 15796     | 34.3          | 18          | 90    |   |   |

## A4

FTC and the Department of Justice. (2011). "Statement of Antitrust Enforcement Policy Regarding Accountable Care Organizations Participating in the Medicare Shared Savings Program." Final Policy Statement, 1-18

### Challenges [\[edit\]](#)

The ACO has the potential to improve the quality of care while reducing healthcare spending in a nation with high health expenditures. However, several challenges to ACOs may affect the implementation and development of ACOs. First of all, there is a lack of specificity regarding how ACOs should be implemented. In addition, the American Hospital Association has estimated ACO formation to incur high startup costs as well as large annual expenses to maintain the system.<sup>[35]</sup> Finally, ACOs risk being accused of violating antitrust laws if they are perceived to drive up costs through reducing healthcare competition while providing lower quality of care.<sup>[36]</sup> To address the issue of antitrust violation, the U.S. Department of Justice has offered a voluntary antitrust review process for ACOs.<sup>[37]</sup> There are also significant challenges to primary-care physicians who join an ACO through participation in a group practice, hospital-medical practice alignment, or another joint venture —such as an independent practice association (IPA). Physician groups will need a robust Electronic Health Record (EHR) system that is capable of advanced reporting, disease registries, and patient population care-management. Organizations that have achieved their Patient Centered Medical Home (PCMH) accreditation have already mastered these functions and are thus further along the road to meeting ACO metrics.<sup>[38]</sup>

36. ^ FTC and the Department of Justice. (2011). "Statement of Antitrust Enforcement Policy Regarding Accountable Care Organizations Participating in the Medicare Shared Savings Program." Final Policy Statement, 1-18.

## A5

Department of Health and Human Services: Centers for Medicare and Medicaid (2011). "Medicare Program: Medicare Shared Savings Program: Accountable Care Organizations." Federal Register. p.19570

### ACO Quality Measures [\[edit\]](#)

To address the goal of improving healthcare quality, CMS has established five domains in which to evaluate the quality of an ACO's performance. The five domains are patient/caregiver experience, care coordination, patient safety, preventative health, and at-risk population/frail elderly health.<sup>[25]</sup>

25. ^ Department of Health and Human Services: Centers for Medicare and Medicaid (2011). "Medicare Program: Medicare Shared Savings Program: Accountable Care Organizations." Federal Register. p.19570

## Appendix B – Positioning Strategy

### B1

<http://www.eclinicalworks.com/ccmr-overview.htm>

The screenshot shows the eClinicalWorks website with a navigation bar at the top. The main heading is "population management". On the left, there's a sidebar labeled "products" with a section for "CCMR for ACO" and a link to "Our Customers". In the center, there's a section titled "Care Coordination Medical Record" with the subtext "Everything needed to support ACO, PCMH, Home Health, and Shared Savings initiatives". Below this is a button labeled "Schedule a Demo" with a clock icon. To the right is a circular diagram divided into four quadrants: "Analytics" (top), "Patient Engagement" (top-right), "Care Planning" (bottom-right), and "Referral Network" (bottom). The bottom arc of the circle is labeled "Care Coordination Connector". At the bottom of the page, there's a paragraph about the CCMR solution and a yellow-outlined box containing detailed information about it.

As the country considers various options for far-reaching healthcare reform, the patient-centered care model and shared savings programs provide alternative approaches to care delivery, performance measurement, and value-based payment reform that consider the continuum of patient care. In response to the need for a technology solution that provides payers, providers, and patients with the functionality required to deliver on the ACO/PCMH model, eClinicalWorks® has developed the Care Coordination Medical Record (CCMR) - an interoperability platform that supports the component parts of accountable care.

CCMR is a sophisticated web-based solution that leverages automation to help clients build high performance care teams, drive patient engagement, and integrate actionable reporting into population health management and quality improvement workflows. CCMR facilitates tight communication between all stakeholders, integrates into a community record as well as individual EMRs, and provides visibility that helps manage the most complex patients with the highest costs, while ensuring that all practices in the enterprise are achieving their clinical and financial goals.

B2

<http://start.drchrono.com/start-doctor-ehr/?gclid=CKa72Z730rcCFY0WMgodOxEAvw>



Save time & increase revenue with your free drchrono EHR:

First Name

Last Name

Email

Get Your EHR

Save time. Increase revenue.  
Improve Patient Care.

You're a doctor, not a data-entry specialist.  
Let drchrono do your paperwork and billing  
so you can focus on your patients.

drchrono's EHR is a huge time saver.  
The beauty of this app is how I can  
customize it to my own workflows.



- Dr. Nathan Emmert



The New York Times

USA TODAY

THE WALL STREET JOURNAL

CNBC

Forbes

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B3

[http://www.fountainvalleyhospital.com/en-US/aboutUs/ForPhysicians/Documents/Physician%20Express\\_FAQ.pdf](http://www.fountainvalleyhospital.com/en-US/aboutUs/ForPhysicians/Documents/Physician%20Express_FAQ.pdf)



## Physician Express: FAQs

### Why is Tenet addressing mobile technology?

Tenet is excited to offer the Physician Express app to ensure physicians can take advantage of the opportunity to fully align our new CPOE capabilities with cutting edge mobile technology. In doing so, we are equipping physicians to enhance clinical outcomes and efficiency of care both from the point of care and from outside the brick and mortar environment.

### What is Physician Express?

Physician Express is a Cerner® solution that enables quick access to review clinical information and submit orders. With the initial rollout stage, from a patient list, the provider can quickly view the patient's current and outstanding orders, as well as access comprehensive clinical information such as problems, diagnosis, allergies, medications, vitals and more. In subsequent rollout stages, laboratory and radiology orders can be submitted directly to the EHR, providing a seamlessly integrated experience.

### Is use of the app required?

No, use of Physician Express is voluntary.

### Does Physician Express meet Meaningful Use?

Physician Express is currently being evaluated for MU. The solution is an extension of and leverages Millennium capabilities, and therefore is being considered as a component of the existing Cerner CPOE solution.

### Who can place orders using Physician Express?

Physician Express honors the same organization and privilege security as Millennium.

### Are the orders integrated with Millennium?

Yes. Orders placed from Physician Express are integrated and electronically submitted to Millennium. Therefore, those orders are immediately actionable in the system and include any post ordering process, such as pharmacy review or lab collection.

### Will meds be supported?

Yes. Inpatient, single ingredient, non-IV and non-intermittent meds ordering is currently on the road map. This capability will leverage Cerner's investment to enable Orders as a platform.

## B4

[http://careerplanning.about.com/od/occupations/p/medical\\_sec.htm](http://careerplanning.about.com/od/occupations/p/medical_sec.htm)

|  |
|--|
| <p><b>Earnings:</b></p> <p>Medical secretaries earned <a href="#">median hourly wages</a> of \$14.51 and a median annual salary of \$30,190 in 2011.</p> <p>Use the <a href="#">Salary Wizard at Salary.com</a> to find out how much a Medical Secretary currently earns in your city.</p> <p><b>A Day in a Medical Secretary's Life:</b></p> <p>On a typical day a medical secretary's tasks might include:</p> <ul style="list-style-type: none"><li>• answering telephones</li><li>• scheduling appointments</li><li>• routing phone calls to appropriate staff</li><li>• taking messages</li><li>• typing correspondence</li><li>• preparing financial reports</li><li>• transcribing written information</li><li>• greeting patients</li><li>• helping patients complete intake forms</li><li>• completing insurance forms</li><li>• receiving laboratory results and routing them to appropriate staff</li><li>• maintaining medical files</li><li>• communicating with insurance companies</li><li>• communicating with the offices of other healthcare providers</li><li>• maintaining inventory of forms and supplies</li><li>• preparing bills</li><li>• coordinating staff members' schedules</li><li>• receiving payment from patients</li></ul> <p>Sources:</p> <p>Bureau of Labor Statistics, US Department of Labor, <b>Occupational Outlook Handbook</b>, 2012-13 Edition, <i>Secretaries and Administrative Assistants</i>, on the Internet at <a href="http://www.bls.gov/ooh/Office-and-Administrative-Support/Secretaries-and-administrative-assistants.htm">http://www.bls.gov/ooh/Office-and-Administrative-Support/Secretaries-and-administrative-assistants.htm</a> (visited January 14, 2013).</p> <p>Employment and Training Administration, US Department of Labor, <b>O*NET Online</b>, <i>Medical</i></p> |
|--|

## B5

<http://www.cdc.gov/nchs/data/ad/ad383.pdf>

| Characteristic  | Medical practices <sup>1</sup> |                |
|-----------------|--------------------------------|----------------|
|                 | Number                         | Standard error |
| Total . . . . . | 161,200                        | 5,300          |

## Appendix C – Marketing Mix

### C1

<https://www.federalregister.gov/articles/2011/11/02/2011-27461/medicare-program-medicare-shared-savings-program-accountable-care-organizations#h-71>

#### *c. Quality Measures for Use in Establishing Quality Performance Standards That ACOs Must Meet for Shared Savings*

Based upon the principles described previously, we proposed to measure (76 FR 19571) or use in the calculation of the ACO Quality Performance Standard. We proposed that ACOs would submit data on these measures using the process described in the proposed rule and meet defined quality performance thresholds. We proposed that ACOs would be required to report quality measures and meet applicable performance criteria, as defined in rulemaking, for all years within the agreement period to be considered as having met the quality performance standard. Specifically, for the first year of the program we proposed for the quality performance standard to be at the level of full and accurate measures reporting; for subsequent years, we proposed the quality performance standard would be based on a measures scale with a minimum attainment level. We proposed that ACOs that do not meet the quality performance thresholds for all measures would not be eligible for shared savings, regardless of how much per capita costs were reduced, which is discussed further in section II.F.4.b.2. of this final rule.

*Comment:* One commenter requested clarification on whether care provided outside the ACO would count toward the ACO's quality metrics. One commenter recommended we require measures reporting for all patients seen by the ACO, not just those assigned in order to simplify the reporting process and spur improvement across the ACO's entire patient population.

## C2

<http://www.commonwealthfund.org/Publications/Case-Studies/2009/Jul/Organizing-for-Higher-Performance-Case-Studies-of-Organized-Delivery-Systems.aspx>

with one another to provide coordinated care to the beneficiary population, align incentives and lower overall healthcare costs.<sup>[27]</sup> Although ACOs have been compared to health maintenance organizations (HMOs), ACOs are different in that they allow providers much freedom in developing the ACO infrastructure.<sup>[28]</sup> Any provider or provider organization may assume the leadership role of running an ACO, as the ACA does not explicitly designate any provider to that role.

### Payers [edit]

The federal government, in the form of Medicare, will be the primary payer of an ACO.<sup>[29]</sup> Other payers include private insurances, or employer-purchased insurance. Payers may play several roles in helping ACOs achieve higher quality care and lower expenditures. Payers may collaborate with one another to align incentives for ACOs and create financial incentives for providers to improve healthcare quality.<sup>[30]</sup>

### Patients [edit]

<sup>29.</sup> ^ Medicare Payment Advisory Commission. (2009). "Report to the Congress—Improving Incentives in the Medicare Program." MedPac. p.30-56.

<sup>30.</sup> ^ McCarthy, D., Mueller, K. (2009). "Organizing for Higher Performance: Case Studies of Organized Delivery Systems." The Commonwealth Fund. p.1-37. ↗

<sup>31.</sup> ^ Springgate, B.F., Brook, R.H. (2011). "Accountable Care Organizations and Community Empowerment." Health Affairs. p.1800-1801

## Appendix D – Media Strategy

### D1 – MediaMark

|                      | Fall 2011 Media: Demographics - Respondent<br>Respondent - Type of Business<br>Other Medical<br>Total Adults |           |            |          |       |  |
|----------------------|--|-----------|------------|----------|-------|--|
|                      | Total '000   | Proj '000 | Pct Across | Pct Down | Index |  |
| TV (total) I (Heavy) | 46047  | 1113      | 2.4        | 10.6     | 53    |  |
| TV (total) II        | 46085  | 1967      | 4.3        | 18.7     | 94    |  |
| TV (total) III       | 46087  | 2518      | 5.5        | 23.9     | 120   |  |
| TV (total) IV        | 46109  | 2681      | 5.8        | 25.5     | 127   |  |
| TV (total) V (Light) | 46088  | 2238      | 4.9        | 21.3     | 106   |  |

### D2 – MediaMark

|                     | Fall 2011 Media: Demographics - Respondent<br>Respondent - Type of Business<br>Other Medical<br>Total Adults |           |            |          |       |  |
|---------------------|--|-----------|------------|----------|-------|--|
|                     | Total '000   | Proj '000 | Pct Across | Pct Down | Index |  |
| Total               | 230416   | 10517     | 4.6        | 100      | 100   |  |
| Men                 | 111472   | 2258      | 2          | 21.5     | 44    |  |
| Women               | 118944   | 8259      | 6.9        | 78.5     | 152   |  |
| Magazines I (Heavy) | 46055  | 2900      | 6.3        | 27.6     | 138   |  |
| Magazines II        | 46099  | 2376      | 5.2        | 22.6     | 113   |  |
| Magazines III       | 46095  | 2104      | 4.6        | 20       | 100   |  |
| Magazines IV        | 46074  | 1753      | 3.8        | 16.7     | 83    |  |
| Magazines V (Light) | 46092  | 1384      | 3          | 13.2     | 66    |  |
| Newspaper I (Heavy) | 46101  | 2047      | 4.4        | 19.5     | 97    |  |

### D3 – MediaMark

|                    | Fall 2011 Media: Demographics - Respondent<br>Respondent - Type of Business<br>Other Medical<br>Total Adults |           |            |          |       |  |
|--------------------|--|-----------|------------|----------|-------|--|
|                    | Total '000   | Proj '000 | Pct Across | Pct Down | Index |  |
| Internet I (Heavy) | 46104  | 2207      | 4.8        | 21       | 105   |  |
| Internet II        | 46086  | 2311      | 5          | 22       | 110   |  |
| Internet III       | 46070  | 2880      | 6.3        | 27.4     | 137   |  |
| Internet IV        | 46089  | 2091      | 4.5        | 19.9     | 99    |  |
| Internet V (Light) | 46068  | 1027      | 2.2        | 9.8      | 49    |  |

D4

<http://www.omediakit.com/hotdata/publishers/oprahmaga3395825/advertiser/3744995/2968553/image1.gif>



Rate Card #16 | Rate Base 2,350,000 | Effective 1/13 Issue—all rates are gross

| VOLUME DISCOUNT<br>PAGE EQUIVALENT | 1 PAGE    | 6%        | 10%       | 16%       | 19%       | 21%       | 24%       |
|------------------------------------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| FOUR COLOR                         |           | 2 PAGES   | 3 PAGES   | 6 PAGES   | 9 PAGES   | 12 PAGES  | 15 PAGES  |
| 1 PAGE                             | \$157,610 | \$148,153 | \$141,849 | \$132,392 | \$127,664 | \$124,512 | \$119,784 |
| 2/3 Page                           | 126,110   | 118,543   | 113,499   | 105,932   | 102,149   | 99,627    | 95,844    |
| 1/2 Page                           | 102,470   | 96,322    | 92,223    | 86,075    | 83,001    | 80,951    | 77,877    |
| 1/3 Page                           | 78,820    | 74,091    | 70,938    | 66,209    | 63,844    | 62,268    | 59,903    |

MediaMark

|                          | Fall 2011 Media: Demographics - Respondent |            |           |            |          |       |
|--------------------------|--|------------|-----------|------------|----------|-------|
|                          | Respondent - Type of Business              |            |           |            |          |       |
|                          | Other Medical                              |            |           |            |          |       |
|                          | Total Adults                               |            |           |            |          |       |
|                          |  | Total '000 | Proj '000 | Pct Across | Pct Down | Index |
| NNN Top 25 (Sunday)      |  | 47758      | 2310      | 4.8        | 22       | 106   |
| North American Fisherman | *  | 2951       | 42        | 1.4        | 0.4      | 31    |
| North American Hunter    | *  | 5223       | 118       | 2.3        | 1.1      | 49    |
| O, The Oprah Magazine    |  | 14331      | 1343      | 9.4        | 12.8     | 205   |
| Official Xbox Magazine   | *  | 5558       | 182       | 3.3        | 1.7      | 72    |

D5

[http://img.webmd.com/dtmcms/live/webmd/consumer\\_assets/site\\_images/miscellaneous/sales/webmd\\_magazine\\_media\\_kit\\_2012.pdf](http://img.webmd.com/dtmcms/live/webmd/consumer_assets/site_images/miscellaneous/sales/webmd_magazine_media_kit_2012.pdf)

## 2012 Ad Rates, Dates, and Specifications

### 2012 Rates

Rate Base 1,300,000

Rates are gross

#### FULL COLOR

|           |          |
|-----------|----------|
| Full Page | \$89,000 |
| 2/3 Page  | 66,770   |
| 1/2 Page  | 57,900   |
| 1/3 Page  | 44,500   |
| Spread    | 178,000  |

#### BLACK & WHITE

|           |          |
|-----------|----------|
| Full Page | \$78,380 |
| 2/3 Page  | 58,770   |
| 1/2 Page  | 51,000   |
| 1/3 Page  | 39,200   |
| Spread    | 156,900  |

#### COVER RATES

|           |           |
|-----------|-----------|
| 2nd Cover | \$106,800 |
| 3rd Cover | 100,250   |
| 4th Cover | 115,750   |

MediaMark

|                          | Fall 2011 Media: Demographics - Respondent |            |           |            |          |       |
|--------------------------|--|------------|-----------|------------|----------|-------|
|                          | Respondent - Type of Business              |            |           |            |          |       |
|                          | Other Medical                              |            |           |            |          |       |
|                          | Total Adults                               |            |           |            |          |       |
|                          |  | Total '000 | Proj '000 | Pct Across | Pct Down | Index |
| Washington Post (Sunday) | *  | 1924       | 126       | 6.5        | 1.2      | 143   |
| WebMD the Magazine       |  | 9167       | 1111      | 12.1       | 10.6     | 265   |
| Weight Watchers          |  | 10900      | 831       | 7.6        | 7.9      | 167   |

D6

<http://www.pacificmagazines.com.au/Pages/Magazines/MediaKit.aspx?mid=32075d1c-3915-455c-ab41-fd85f7645d02>

Better Homes and Gardens: Page Rates

| Page Rates                   | Casual | x2     | x4     | x8     | x12    |
|------------------------------|--------|--------|--------|--------|--------|
| Double Page Spread           | 59,674 | 58,182 | 56,694 | 55,204 | 53,714 |
| Right, First Half Guaranteed | 32,821 | 32,000 | 31,182 | 30,362 | 29,543 |
| Full Page                    | 29,837 | 29,091 | 28,347 | 27,602 | 26,857 |
| Half Page                    | 17,902 | 17,455 | 17,008 | 16,561 | 16,114 |

MediaMark

|                        | Fall 2011 Media: Demographics - Respondent |            |           |            |          |       |
|------------------------|--|------------|-----------|------------|----------|-------|
|                        | Respondent - Type of Business              |            |           |            |          |       |
|                        | Other Medical                              |            |           |            |          |       |
|                        | Total Adults                               |            |           |            |          |       |
|                        |  | Total '000 | Proj '000 | Pct Across | Pct Down | Index |
| Baby Talk              | *  | 4424       | 345       | 7.8        | 3.3      | 171   |
| Barron's               | *  | 911        | 65        | 7.1        | 0.6      | 156   |
| Bassmaster             | *  | 3537       | 63        | 1.8        | 0.6      | 39    |
| Better Homes & Gardens |  | 38331      | 3025      | 7.9        | 28.8     | 173   |
| Bicycling              | *  | 2080       | 156       | 7.5        | 1.5      | 164   |
| Birds & Blooms         | *  | 6315       | 381       | 6          | 3.6      | 132   |

## D7

<http://www.ebscomags.com/doctor-office-magazines>

Most popular medical clinic and doctor office magazines discounted for waiting rooms

|  |  |   |   |   |  |
|--|--|---|---|---|--|
| <b>PEOPLE</b><br><br>Cover Price: \$181.48<br>You Pay: \$52.47<br><a href="#">Add to cart</a> | <b>TIME - DOMESTIC ED</b><br><br>Cover Price: \$277.20<br>You Pay: \$29.95<br><a href="#">Add to cart</a> | <b>BETTER HOMES AND GARDENS</b><br><br>Cover Price: \$41.88<br>You Pay: \$12.00<br><a href="#">Add to cart</a> | <b>ESPN MAGAZINE</b><br><br>Cover Price: \$103.74<br>You Pay: \$29.97<br><a href="#">Add to cart</a> | <b>HARPERS BAZAAR</b><br><br>Cover Price: \$47.88<br>You Pay: \$12.00<br><a href="#">Add to cart</a> | <b>COOKING LIGHT</b><br><br>Cover Price: \$49.50<br>You Pay: \$18.00<br><a href="#">Add to cart</a> |
|--|--|---|---|---|--|

## D8

<http://info.modernhealthcare.com/rs/crain/images/2013%20Modern%20Healthcare%20Media%20Kit.pdf>

pdf

| Frequency | Page (30") | 2/3 page (20") | 1/2 page Island | 1/2 page (15") |
|-----------|------------|----------------|-----------------|----------------|
| 1x        | \$16,860   | \$12,480       | \$11,295        | \$10,260       |
| 7x        | \$15,660   | \$11,600       | \$10,500        | \$9,540        |
| 10x       | \$15,090   | \$11,120       | \$10,050        | \$9,150        |
| 13x       | \$13,980   | \$10,400       | \$9,330         | \$8,445        |
| 18x       | \$13,020   | \$9,600        | \$8,715         | \$7,935        |
| 26x       | \$12,240   | \$9,180        | \$8,265         | \$7,500        |
| 39x       | \$11,640   | \$8,640        | \$7,800         | \$7,110        |
| 52x       | \$11,370   | \$8,400        | \$7,665         | \$6,960        |

Rate card #41 – Effective January 1, 2013

## D9

<http://www.modernhealthcare.com/section/aboutus>

### No. 1 in Readership among Healthcare Executives

Modern Healthcare is the industry's leading source of healthcare business and policy news, research and information. We report on important healthcare events and trends, as they happen, through our weekly print magazine, websites, e-newsletters, mobile products and events. Our readers use that information to make informed business decisions and lead their organizations to success. It's for this reason that *Modern Healthcare* magazine is ranked No. 1 in readership among healthcare executives and deemed a "must-read" by the who's who in healthcare.

## D10

<http://my.psychologytoday.com/files/static/PT-mediakit-2012-091311.pdf>

| Four Color | Rate Base: 275,000 |        |        |        |        |
|------------|--------------------|--------|--------|--------|--------|
|            | 1x                 | 3x     | 6x     | 9x     | 12x    |
| Full Page  | 20,055             | 18,795 | 17,640 | 16,590 | 15,645 |
| 2/3 Page   | 14,700             | 13,860 | 13,125 | 12,180 | 11,550 |
| 1/2 Page   | 11,550             | 10,920 | 10,185 | 9,555  | 8,925  |
| 1/3 Page   | 7,770              | 7,350  | 6,930  | 6,615  | 6,300  |

## MediaMark

| Fall 2011 Media: Demographics - Respondent |   |            |           |            |          |       |
|--|---|------------|-----------|------------|----------|-------|
| Respondent - Type of Business              |   |            |           |            |          |       |
| Other Medical                              |   |            |           |            |          |       |
| Total Adults                               |   |            |           |            |          |       |
|  |   | Total '000 | Proj '000 | Pct Across | Pct Down | Index |
| Popular Mechanics                          | * | 8109       | 173       | 2.1        | 1.6      | 47    |
| Popular Science                            | * | 6556       | 147       | 2.2        | 1.4      | 49    |
| Prevention                                 |   | 9318       | 955       | 10.3       | 9.1      | 225   |
| Psychology Today                           |   | 3114       | 470       | 15.1       | 4.5      | 331   |
| Reader's Digest                            |   | 25397      | 1775      | 7          | 16.9     | 153   |
| Real Simple                                |   | 7130       | 776       | 10.9       | 7.4      | 238   |

## D11 – MediaMark

| Fall 2011 Media: Demographics - Respondent |   |            |           |            |          |       |
|--|---|------------|-----------|------------|----------|-------|
| Respondent - Type of Business              |   |            |           |            |          |       |
| Other Medical                              |   |            |           |            |          |       |
| Total Adults                               |   |            |           |            |          |       |
|  |   | Total '000 | Proj '000 | Pct Across | Pct Down | Index |
| Cable: TBS                                 |   | 66976      | 3341      | 5          | 31.8     | 109   |
| Cable: TeenNick                            | * | 6081       | 367       | 6          | 3.5      | 132   |
| Cable: The Tennis Channel                  | * | 2208       | 201       | 9.1        | 1.9      | 200   |
| Cable: TLC (The Learning Channel)          |   | 45016      | 2973      | 6.6        | 28.3     | 145   |
| Cable: Travel Channel                      |   | 20860      | 935       | 4.5        | 8.9      | 98    |
| Cable: truTV                               |   | 28341      | 1312      | 4.6        | 12.5     | 101   |

Based off a phone call with TLC, we were able to find out that a typical 30-second advertisement during primetime would cost approximately \$20,000.

## D12 – MediaMark

| Fall 2011 Media: Demographics - Respondent |  |            |           |            |          |       |
|--|--|------------|-----------|------------|----------|-------|
| Respondent - Type of Business              |  |            |           |            |          |       |
| Other Medical                              |  |            |           |            |          |       |
| Total Adults                               |  |            |           |            |          |       |
|  |  | Total '000 | Proj '000 | Pct Across | Pct Down | Index |
| TV (Prime time) I (Heavy)                  |  | 46069      | 1605      | 3.5        | 15.3     | 76    |
| TV (Prime time) II                         |  | 46089      | 2241      | 4.9        | 21.3     | 107   |
| TV (Prime time) III                        |  | 46093      | 2368      | 5.1        | 22.5     | 113   |
| TV (Prime time) IV                         |  | 46097      | 2172      | 4.7        | 20.7     | 103   |
| TV (Prime time) V (Light)                  |  | 46069      | 2131      | 4.6        | 20.3     | 101   |

## D13 – MediaMark

| Fall 2011 Media: Demographics - Respondent |   |            |           |            |          |       |
|--|---|------------|-----------|------------|----------|-------|
| Respondent - Type of Business              |   |            |           |            |          |       |
| Other Medical                              |   |            |           |            |          |       |
| Total Adults                               |   |            |           |            |          |       |
|  |   | Total '000 | Proj '000 | Pct Across | Pct Down | Index |
| Web Sites: Superpages.com                  | * | 1282       | 109       | 8.5        | 1        | 187   |
| Web Sites: WebMD.com                       |   | 23686      | 2430      | 10.3       | 23.1     | 225   |
| Web Sites: WhitePages.com                  |   | 12665      | 904       | 7.1        | 8.6      | 156   |

Email from WebMD:

Thanks for reaching out to WebMD. Everything we do is custom, depending on where on the site you'd like to advertise/who you're trying to reach (same with our Newsletters). For the purposes of your studies I would go with a \$10 for the 300x250 ad unit, \$20 for mobile and \$1500 for the Newsletter. Note these are arbitrary numbers and do not reflect specific pricing.

**D14**

<http://www.seattletimescompany.com/advertise/adtosales.htm>

|                 |      |     |       |      |
|-----------------|------|-----|-------|------|
| Health Services | 8000 | 4.5 | -18.8 | -1.2 |
|-----------------|------|-----|-------|------|

## Appendix E – Owned Digital Media

### E1

<http://www.executionists.com/blog/website-design/cost-to-build-websites-2013/>

#### **Basic Website Components and Costs**

On average, the following figures can be applied to estimating the cost of a small business web site:

- **Domain Name** – \$10/year
- **Hosting** – \$25 to \$200 a year (depending on traffic & hosting services)
- **Web design and development time** – 60 hours and up
- **Continued website Maintenance** – \$500 a year and up (depending on number/type of updates required)
- **Marketing your website online** – \$750 a month and up

The majority small business websites we design, develop and launch range from **\$6,000 – \$20,000**. Using the a la carte estimates above you can see how they can add up quickly. Another way to break the budget down is to assume:

- **15% Planning**
- **25% Interface design**
- **40% Programming**
- **20% Project Management**

### E2

<http://en.support.wordpress.com/domains/>

Registering a .com, .org, or .net domain through WordPress.com and mapping that domain to your blog starts at \$18.00 per domain and per year, or \$25.00 per domain and per year for a .me domain. For \$8.00 more, you can also make the domain registration private.

E3

<http://www.statisticbrain.com/twitter-statistics/>

## Twitter Statistics

Share This



| Statistic Verification   |
|--|
| Source: Twitter, Huffington Post, eMarketer  |
| Research Date: 5.7.2013  |
| Twitter is an online social networking website and microblogging service that allows users to post and read text-based messages of up to 140 characters, known as "tweets". Launched in July of 2006 by Jack Dorsey, Twitter is now in the top 10 most visited internet sites. |

| Twitter Company Statistics  | Data        |
|---|-------------|
| Total number of active registered Twitter users                       | 554,750,000 |
| Number of new Twitter users signing up everyday                       | 135,000     |
| Number of unique Twitter site visitors every month                    | 190 million |
| Average number of tweets per day                                      | 58 million  |
| Number of Twitter search engine queries every day                     | 2.1 billion |
| Percent of Twitter users who use their phone to tweet                 | 43 %        |
| Percent of tweets that come from third party applicants               | 60%         |
| Number of people that are employed by Twitter                         | 2,500       |
| Number of active Twitter users every month                            | 115 million |
| Percent of Twitter users who don't tweet but watch other people tweet | 40%         |
| Number of days it takes for 1 billion tweets                          | 5 days      |
| Number of tweets that happen every second                             | 9,100       |

E4

<http://waracle.net/how-to-budget-for-iphone-and-google-android-app-development-part-2/>

### How To Budget For iPhone and Google Android App Development

| App Type   | Stage       | Single Platform  | Two Platforms    | Three Platforms  |
|------------|-------------|------------------|------------------|------------------|
| Simple     | Design      | From £2K - £3K   | From £3K - £5K   | From £4K - £6K   |
|            | Development | From £3K - £5K   | From £5K - £8K   | From £6K - £9K   |
|            | Testing     | From £3K - £5K   | From £5K - £8K   | From £6K - £9K   |
|            | Total       | From £8K - £13K  | From £13K - £21K | From £16K - £24K |
| App Type   | Stage       | Single Platform  | Two Platforms    | Three Platforms  |
| Data List  | Design      | From £2K - £3K   | From £3K - £5K   | From £4K - £6K   |
|            | Development | From £7K - £11K  | From £11K - £17K | From £14K - £21K |
|            | Testing     | From £3K - £5K   | From £5K - £8K   | From £6K - £9K   |
|            | Total       | From £12K - £19K | From £19K - £30K | From £24K - £36K |
| App Type   | Stage       | Single Platform  | Two Platforms    | Three Platforms  |
| Complex    | Design      | From £3K - £5K   | From £5K - £8K   | From £6K - £9K   |
|            | Development | From £10K - £15K | From £15K - £23K | From £20K - £30K |
|            | Testing     | From £4K - £6K   | From £6K - £9K   | From £8K - £12K  |
|            | Total       | From £17K - £26K | From £26K - £40K | From £34K - £51K |
| App Type   | Stage       | Single Platform  | Two Platforms    | Three Platforms  |
| Enterprise | Design      | From £4K - £6K   | From £6K - £9K   | From £8K - £12K  |
|            | Development | From £20K - £30K | From £30K - £45K | From £40K - £60K |
|            | Testing     | From £8K - £12K  | From £12K - £18K | From £16K - £24K |
|            | Total       | From £32K - £48K | From £48K - £72K | From £64K - £96K |

## E5

<http://www.bluecloudsolutions.com/blog/cost-develop-app/>

- **Simple, table based app - \$1,000-\$4,000** - you provide all the content, clear direction, and example apps of what you want it to do. If you know your way around Photoshop, you can probably supply the graphics which will cap this project at \$1,500. The additional costs are when you want to GPS locators, Social media integration or bells and whistles like that.
- **Database App (native) – \$8,000-\$50,000** – Again, you provide every piece of content, image, writing, sound, etc. The cost is going to come from creating the logic within the app and architecting all the usability and/or game play. The content will usually be dropped in and then parsed accordingly. These projects tend to be front heavy since the data is what's driving the entire game and the framework is so important.
- **Additional Includes – See below** - here's a quick list of additional functions you may want to add into your current app:
  - *In-App Purchasing – \$1,000-\$3,000* – this allows for users to buy new content or full versions of the apps. The cost spread comes from the amount of in-app purchasing, the complexity, and whether or not you build it all into the first app or if you are doing it from a server.
  - *Web Services – \$1,000-\$5,000* – This is taking the content to a remote access point so that you can update your app with an XML files instead of raw code changes. The degree to what you need varies but I would recommend having this conversation with your developer before getting too deep – it can save you HUGE headaches down the road.
  - *Game Center – \$1,000* – Apple's done a good job at making this integration easy with the SDK. As long as you keep the numbers clean, you should be able to integrate easily.
  - *Share Capabilities – \$500-\$1,500* – This is mostly for social media (twitter, facebook) and emailing, but there can be other integrations. WordPress websites, for example, may be one. Lots of options and most of these platforms have robust APIs to make it work well.

- **iPhone only** (usually the base line is not done for the retina display, as seen in the iPhone 4 as they require higher resolution files) – **\$500-10,000** – This will get you a base level design that you can send over to the developer who will be able to add these images into the code. HELPFUL TIP: ask the developer what they want the files named and do that for them before sending. It will save you both lots of time and headaches.
- **iPhone 4 Compatible – Add 25% to above cost** - these images will be sized at 960 x 640px height (twice the 480x320 for the regular iPhone)
- **iPad – Add 50% to above cost** – this is assuming that the layout is very similar and user flow is also similar. In many cases you will have to create alternate functionality to accommodate for the iPad size and speed, which requires new designs.

The icons should be included in this entire package and you can probably ask for screen shots if you want to have some that are better than doing a simple screen grab of your phone. I'll say it again – don't skimp on design....you'll have a MUCH harder time making your money back.

### **Total App Costs**

There really aren't any hidden fees except the the \$99 Apple will charge you per year and the 30% cut they take for each sale you make. Everything else will be in development, design, and IT architecture (hosting, servers, etc). The total cost of an app can vary based on all the different variables from above.

## Appendix F - Direct Marketing

F1

### 2013 E-BLAST ADVERTISING RATES AND SPECIFICATIONS

advance  
[www.advanceweb.com](http://www.advanceweb.com)



**ADVANCE E-Blasts**  
Target your e-message to qualified ADVANCE subscribers today.

**NEW LEAD GENERATION OPPORTUNITY**  
Learn about enhanced e-mail services available to retarget your e-mail message and audience based on behavioral actions. ADVANCE can build an e-mail series that will increase your e-mail conversion rates, ROI, and create further interaction with prospects. Call your rep today for a quote.

**List Rental Rates**

| Addresses       | Rates (\$)       |
|-----------------|------------------|
| 1-19,999        | 0.52 per address |
| 20,000-49,999   | 0.28 per address |
| 50,000-99,999   | 0.23 per address |
| 100,000+        | 0.21 per address |
| Personalization | 0.20 per address |

**List Management Rates\***

| Type       | Addresses | Rates (\$) |
|------------|-----------|------------|
| match/omit | 1-2,499   | 250/list   |
| match/omit | 2,500+    | 500/list   |

\* If client provides us with names only — and not unique email addresses — ADVANCE will exclude all names on the rental list that are the same/similar (ex. John Smith, Johnny Smith, J. Smith, etc.) to ensure that the correct person is not included in the mailing.

**Other Services Offered**

REPRINTS- Call 800-355-5827 for a quote on reprints of any article in ADVANCE.  
DIRECT MAIL LISTS RENTAL- Our lists are available at \$110 per thousand names.  
Postage and handling charges apply. Call for more information.

- All e-blasts are .html files
- Rates include design and build of .html file from client supplied components (text file, .jpeg or .tiff graphics)
- Rates are ad agency commissionable when .html file is supplied by ad agency
- List rental volume discounts are per specialty
- Lists cannot be combined to meet the minimum
  - Minimum order of \$500 per list based on net rates
  - Frequency of e-blasts combines with electronic ads for contract fulfillment
- Combine specialties for a \$250 fee to create combined lists/profiles each time list is rented
- A production fee of \$300 per ad will apply when client/agency supplied .pdf files require .html conversion

**E-Blast Production Notes:**

All .html files created by ADVANCE are built to be Outlook07 compatible, which targets the majority of email clients for best performance.

The ADVANCE production team will take every step possible to duplicate the look of the supplied .pdf files when converting to .html file; however, we reserve the right to alter the layout to adhere to Outlook07 guidelines.

CMYK print ads will be converted to RGB color standards. Note: Expect color variances between CMYK and RGB. RGB will typically have a brighter hue.

Provide all graphics as a .jpg or .tiff file at 72dpi at 100%.

Fonts will be substituted to conform to Web standard fonts that maximize the legibility of .html files.

# 2013 ELECTRONIC RATES & SIZES



## ELECTRONIC RATES

| Website Ad Rates                   | 1X      | 3X      | 6X      | 12X     | 26X     | 39X     | 52X     |
|------------------------------------|---------|---------|---------|---------|---------|---------|---------|
| Skyscraper                         | \$3,149 | \$2,992 | \$2,834 | \$2,677 | \$2,519 | \$2,362 | \$2,205 |
| Expandable Skyscraper              |         |         |         |         |         |         |         |
| Expandable Leaderboard             |         |         |         |         |         |         |         |
| Leaderboard                        | \$1,800 | \$1,710 | \$1,620 | \$1,530 | \$1,440 | \$1,350 | \$1,260 |
| Super Tile                         |         |         |         |         |         |         |         |
| Medium Rectangle                   |         |         |         |         |         |         |         |
| Medium Rectangle (targeted)        |         |         |         |         |         |         |         |
| Standard Tile                      | \$1,440 | \$1,368 | \$1,296 | \$1,224 | \$1,152 | \$1,080 | \$1,008 |
| Tower                              |         |         |         |         |         |         |         |
| Column Sponsorships*               |         |         |         |         |         |         |         |
| White Paper Sponsorships           |         |         |         |         |         |         |         |
| Video/Multimedia Options           | 1X      | 3X      | 6X      | 12X     | 26X     | 39X     | 52X     |
| Pre-roll Video                     | \$1,440 | \$1,368 | \$1,296 | \$1,224 | \$1,152 | \$1,080 | \$1,008 |
| Pre-podcast Image (targeted)       |         |         |         |         |         |         |         |
| Pre-roll Video (targeted)          | \$1,800 | \$1,710 | \$1,620 | \$1,530 | \$1,440 | \$1,350 | \$1,260 |
| Pre-podcast Video (targeted)       |         |         |         |         |         |         |         |
| Video Ad (targeted)                |         |         |         |         |         |         |         |
| Video Ad (stand-alone)             |         |         |         |         |         |         |         |
| Blogs and Forum Community Ad Rates | 1X      | 3X      | 6X      | 12X     | 26X     | 39X     | 52X     |
| Leaderboard                        | \$1,440 | \$1,368 | \$1,296 | \$1,224 | \$1,152 | \$1,080 | \$1,008 |
| Specialty Page Ad Rates**          | 1X      | 3X      | 6X      | 12X     | 26X     | 39X     | 52X     |
| Skyscraper                         | \$918   | \$872   | \$826   | \$780   | \$734   | \$688   | \$642   |
| Leaderboard                        | \$612   | \$581   | \$551   | \$520   | \$489   | \$459   | \$428   |
| Super Tile                         |         |         |         |         |         |         |         |
| Medium Rectangle                   |         |         |         |         |         |         |         |
| Standard Tile                      | \$489   | \$465   | \$441   | \$416   | \$392   | \$367   | \$343   |
| Tower                              |         |         |         |         |         |         |         |
| E-newsletter Ad Rates              | 1X      | 3X      | 6X      | 12X     | 26X     | 39X     | 52X     |
| Leaderboard                        | \$1,232 | \$1,170 | \$1,109 | \$1,047 | \$986   | \$924   | \$862   |
| Medium Rectangle                   |         |         |         |         |         |         |         |
| Text Only                          | \$986   | \$936   | \$887   | \$838   | \$788   | \$739   | \$690   |
| Digital Alert Email Ad Rates       | 1X      | 3X      | 6X      | 12X     | 26X     | 39X     | 52X     |
| Medium Rectangle                   | \$1,232 | \$1,170 | \$1,109 | \$1,047 | \$986   | \$924   | \$862   |

<http://www.overnightprints.com/businesscards>

Product Details
Pricing & Delivery
Upload Info
Start Files

### PRICING CALCULATOR

Select a Quantity

Select Options:

|   |  |  |  |
|---|--|--|--|
| Sides   | Corners  | Front UV Coating                             | Back UV Coating                              |
| <input checked="" type="radio"/> Single-Sided | <input checked="" type="radio"/> Square              | <input checked="" type="radio"/> No Gloss UV | <input checked="" type="radio"/> No Gloss UV |
| <input checked="" type="radio"/> Double-Sided | <input type="radio"/> Rounded (\$2.00 per 100 cards) | <input type="radio"/> Full UV (free)         | <input type="radio"/> Full UV (free)         |
|   |  | <input type="radio"/> Spot UV (free)         | <input type="radio"/> Spot UV (free)         |

### PRICE

Discount Applied:  
code: UP248BC – Up to 48% off Business cards

Product Subtotal:  
regular: \$92.95 | sale price: \$80.45

Delivery:  
Please enter a zip code on the left to see shipping & handling charges

**Total:**  
**\$80.45** Plus shipping

Price is estimated based on a single product.  
Additional discounts may apply in the shopping cart.

## F2

<http://www.acosummit.com/promotional/grantors.html>

### Diamond Grantor - \$100,000

All the benefits of a Bronze Grantor plus...

- Exclusive recognition on conference brochure cover and home page of the conference website
- 20 total complimentary registrations to the conference
- Your choice of two advertising items and/or events such as: Exclusive Signage at Continental Breakfast, Break, Luncheon and Cyber Café and Exclusive Logo on Calculators, Conference Portfolio, or any combination of your choosing (up to \$12,000 value)
- First Diamond Grantor may hold invitation-only dinner
- Full-page four color advertisement or corporate profile handed out to each attendee with conference portfolio
- 2 ad placements in Accountable Care News ([www.AccountableCareNews.com](http://www.AccountableCareNews.com))

## F3

Tote bags

<http://www.customink.com/styles/port-and-company-tote/164300>



talk to a real person  
800-293-4232

## Your All-Inclusive Price

\$6.35 each | \$3,175.00 total

### What's Included:

- ✓ 500 Port and Company Tote in Stone
- ✓ Screen Printing with 1 Color Front
- ✓ FREE 2-week delivery to 98225
- ✓ Professional Design Review
- ✓ All Printing and Artwork Set-up
- ✓ Money-Back Guarantee

Edit Quote

Start Designing

## T-shirts

<http://www.customink.com/styles/gildan-ultra-cotton-t-shirt/04600#title-link>



talk to a real person  
800-293-4232

## Your All-Inclusive Price

\$20.07 each | \$10,035.00 total

**\$5.22 each | \$2,610.00 total**

You saved \$7,425.00 (74%) with the Volume Discount.

### What's Included:

- ✓ 500 Gildan Ultra Cotton T-shirt in White
- ✓ Screen Printing with 3 Color Front, 0 Color Back
- ✓ FREE 2-week delivery to 98225
- ✓ Professional Design Review
- ✓ All Printing and Artwork Set-up
- ✓ Money-Back Guarantee

[Edit Quote](#)

[Start Designing](#)

## Mugs

<http://www.customink.com/styles/ceramic-mug/79000>



## Your All-Inclusive Price

**\$3.67 each | \$1,835.00 total**

### What's Included:

- ✓ 500 Ceramic Mug in White
- ✓ Screen Printing with 1 Color Front, 0 Color Back
- ✓ FREE 2-week delivery to 98225
- ✓ Professional Design Review
- ✓ All Printing and Artwork Set-up
- ✓ Money-Back Guarantee

[Edit Quote](#)

[Start Designing](#)

## Appendix G – Promotion Budget

### G1

<http://www.research2guidance.com/us-1-3-billion-the-market-for-mhealth-applications-in-2012/>

#### US\$ 1.3 billion: The market for mHealth applications in 2012

25 January 2012  
By Ralf-Gordon Jahns



*2011 already showed significant growth for the mHealth app market. In 2012 the market size will nearly double.*

The smartphone application market for mobile healthcare will reach US\$ 1.3 billion in 2012 – up from **US\$ 718 million in 2011**. Despite this substantial growth, the mHealth market is still in an embryonic state – especially in comparison to the US\$ 6 trillion of the overall global healthcare market. Several factors (esp. smartphone penetration), will continue, however, to drive mHealth market growth over the next couple of years.

\$1,300,000,000 total industry revenue x 4.5% A/S ratio = \$58,500,000 total advertising spending