



Healthcare Marketing White Paper



TRANSITIONING MARKETING EFFORTS TO THE ACO MODEL

5 CHANGES IN MARKETING STRATEGY FOR
ACCOUNTABLE CARE ORGANIZATIONS



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Transitioning to an Accountable Care Organization (ACO) not only requires changes to a hospital's business goals and strategy, but it also requires a complete revamp of its marketing plan. Instead of being responsible for the marketing strategy and execution of one organization, the hospital marketer is charged with driving patients to the larger network. This calls for different objectives, tactics and measurement of success.

In this white paper, we will discuss the charges of accountable care and how to adjust marketing efforts for this new business model.

THE CHARGES OF ACCOUNTABLE CARE

Under an ACO, healthcare success is measured by: improvement in community health, cost reductions, an improved and consistent patient experience, decreased hospital admissions/readmissions and length of stay, better patient outcomes and decreased wait time to see a specialist (Health Strategies & Solutions).

On the flip side, “[if] an ACO is unable to save money, it could be stuck with the costs of investments made to improve care, such as adding new nurse care managers. An ACO also may have to pay a penalty if it doesn’t meet performance and savings benchmarks” (Gold 2014, p. 2).

At the heart of efficiency is preventive and coordinated care. Preventive care focuses on wellness to keep patients healthy in between appointments and encourages them to take control of their personal health. This helps to reduce hospital admissions and expensive treatments by catching ailments earlier.

Coordinated care is when a patient is managed by a network of physicians and hospitals. Primary care, specialty care and hospital physicians and nurses share patient information through an electronic health record to keep patients on their assigned care program and reduce redundancy, such as duplicative testing. It also keeps care and appointments consistent, rather than sporadic, to prevent conditions from getting worse. However, unlike an HMO, patients do have the option to see a specialist outside of their ACO network.

What is an accountable care organization?

“An ACO is a network of doctors and hospitals that shares financial and medical responsibility for providing coordinated care to patients in hopes of limiting unnecessary spending” (Gold 2014, p.1).

ACOs were first introduced by Congress as a way to cut Medicare spending. Traditionally, Medicare operates on a fee-for-service payment model, which often results in unnecessary testing and procedures. In an attempt to limit spending, ACOs offer bonuses to physicians and systems for improving care efficiency and keeping patients healthy and out of the hospital.

5 MARKETING STRATEGY TIPS FOR ACOs

1. Market wellness

Up until recently, hospitals focused on service line marketing. The goal was to promote top specialties and cutting-edge technology to create a halo effect around all other services, i.e., if a hospital has a great cardiac program, it must be great at everything.

But now, instead of seeing ads about minimally invasive surgery or shiny new ER equipment, there has been a surge of wellness marketing, encouraging patients to take better care of themselves. This is especially important for ACOs since physicians and organizations are paid more to keep their community healthy, not treat the sick.

The key to wellness marketing is to focus on preventive health. Some popular wellness campaigns include: weight loss and bariatric surgery, cancer screening and heart disease screening. When caught early, these conditions can be much easier and less expensive to treat.

2. Study your patient base

Conducting thorough research on your patient base, including popular chronic conditions, services frequently used and where most patients access care can help you tailor marketing efforts to the specific health needs of your community. It can also uncover where spending is high and present an opportunity to steer patients to a lower-cost entry point. For example, encouraging patients to see their primary care physician or promoting extended urgent care hours to prevent ER visits.

It’s also important to study social problems in addition to health needs to understand the barriers to preventive healthcare. If your patient base has trouble traveling to your offices, gaining access to healthy food or comprehending physician instructions or medications, this presents an opportunity to address these social problems. Your organization could offer mobile offices or clinics, farmers markets or one-on-one counseling after appointments to ensure patients understand their prescribed treatments.

3. Communicate the benefits

It's important to educate patients on the clear benefits of an ACO and the network that extends beyond your particular office. High-quality, coordinated care isn't something that everyone has access to, and it's definitely a benefit that's worth explaining.

Along with the benefits, it's a good idea to address your patients' main concerns: emphasize that although the ACO provides a different care system, the patient's benefits will not change, they can continue to see any physician who accepts their insurance and an electronic health record still means that their private information is safe.

Keep language simple and avoid the use of any jargon or fine print. It's important that any supporting materials are easy to understand and written in a way that is relatable to the patient. Equally as important, try to minimize communication of the government's involvement and healthcare reform to avoid polarizing political opinions.

4. Get physicians involved

Physicians and nurses are the best advocates for ACOs because they have direct contact with patients. Provide them with talking points and communications materials to share during and after visits that explain the benefits and answer questions about the ACO. You can also put brochures and reading materials in waiting room for patients to review.

Success of an ACO relies heavily on physicians because they are the ones who determine patients' course of care. Support their practices by including their feedback in marketing decisions and providing the tools they need to reach spending and care goals.

5. Build marketing campaigns around solid analytics

Transitioning to an ACO requires a lot of upfront costs for the technology to provide coordinated care and setting up an internal communication system. On top of that, care cost savings will be closely monitored to ensure the ACO meets its goals. Now, more than ever, hospital marketers will need to demonstrate ROI.

Set up marketing campaigns with clear, measurable goals and analytics. Campaigns should be fully integrated across multiple channels to increase the reach and frequency of materials. Digital channels are an inexpensive, measurable approach to support mass media materials. Determine an appropriate media mix based on the research uncovered while studying your patient base and adjust media spend appropriately for your community.

COORDINATED MARKETING EFFORTS

Just like hospital leadership needs to work together to deliver coordinated patient care in an ACO model, hospital marketers are tasked with executing coordinated marketing efforts. With the number one goal shifting from downstream referrals to overall community health, the health network members — and the various marketing channels — have to work together to present integrated, relevant messaging and health services that address the specific needs of their communities. Transitioning to an ACO calls for a new marketing strategy that focuses on wellness, tailored messaging and solid analytics. ■

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