

# The 2012 Elections: What about marketing?

By *Lindsay Resnick, Chief Marketing Officer of KBM Group, Health Services*

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The major hurdles to implementation of the Patient Protection and Affordable Care Act (PPACA) – June’s Supreme Court decision and re-election of Barack Obama – are now history.

Obamacare is here to stay.

While obstacles and legislative fixes lie ahead (regulatory definitions, implementation timelines, funding appropriations), advancing a strategy of “repeal & replace” is now off the table. Expect political wrangling to shift focus to more pressing issues facing the country such as sequestration, budget reconciliation, tax cuts, and 2014 mid-term elections (as if we haven’t had enough!).

For health plans, the next 14 months will be an intense period of preparation, planning and positioning.

Today’s health insurance marketplace – 154 million employer-based, 14 million individually purchased, 47 million Medicaid, 49 million Medicare, and 49 million uninsured – will see profound change. New operating rules demand new thinking. Some of the PPACA provisions that will affect marketing strategies include the rise of the state, federal and private exchanges, premium subsidies, elimination of pre-existing condition restrictions, rating limitations, Medicaid expansion measures and tax assessments.

A year from now, you may wish you had somehow started preparing 10 years before PPACA was signed into law.

A winning health reform strategy starts with you knowing your customers (and potential customers) better than your competitors do.

It means a data-driven direct-to-consumer approach to maximize reform’s opportunities and buffer risks...whether playing defense to protect your membership base, or setting-up a marketplace offensive to claim your fair share of new customers with a short-term land grab under current rules, and then starting 2014 in a position of strength.

Why? With product standardization, regulatory constraints and price transparency leveling the playing field and neutralizing brands, health insurers need to refresh their approach to customer acquisition and retention.

The center of power is rapidly shifting into the hands of the customer. Millions of consumers will be shopping for coverage and migrating between market segments. They’ll be talking about you, price checking you, and recommending you...or not. Tomorrow’s customers will have a wide-ranging choice, and they will determine your value. Forward thinking marketers are making sure existing and prospective customers are engaged in their health care decision-making as they seek support from branded, personalized resources delivered by trusted local partners.

First movers may sometimes fail, but last movers don’t survive.

Based on your core customer segments, product portfolio range, and distribution channel mix every health plan needs to design a customized, strategically sound approach to survive, and thrive as Obamacare advances through its implementation phases. The clock is ticking.

To compete in the new customer-centric healthcare retail game, marketing success will come from taking a 360 degree view of your customer, differentiating your brand position, moving from a business-to-business – B2B – marketing orientation to a direct-to-consumer – D2C – marketing orientation.

Health insurers will have to focus more on distribution outlet “retailization,” and most importantly, developing an actionable framework to serve as the roadmap for your health reform marketing plan.

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