

Colorado regional plan for Brand and Image repositioning

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I. Description of regional reputation challenges:

Kaiser Permanente of Colorado's image and reputation among members is high, but quite low among non-members. The most challenging perceptions are that you cannot choose a doctor at Kaiser Permanente, you never see the same doctor, you do not get personal attention, it's hard to make an appointment, doctors are bottom of the barrel and it's not a good place for care in the long term. Also, we are known as the health plan making the most money in Colorado and our status as a nonprofit is little-known. For some in our audience, the financial success of the organization projects stability.

These perceptions are based on long-standing access problems that have steadily improved but still linger. They also are based on our historical positioning as the blue-collar health plan.

Our network model in Colorado Springs is a clinical and financial success, but doesn't fit easily into simplified "integrated care" messaging.

II. Overview of regional reputation strategies, initiatives and programs

Strategy: Project the reality that Kaiser Permanente of Colorado is one of the Top 10 health care organizations in the country, that care is provided by some of the best physicians in medicine, that we are doing ground-breaking treatments and research, that we are leaders in health care information technology, that we are contributors to our community.

Initiative: Reputation Task Force, assigned in late 2003 to develop and implement projects to raise our reputation among non-members. Using other regions' data and ideas, we will have a list of projects to roll out short-term and long-term by the end of 2003.

Initiative: Top 10 in Health campaign. Year-long campaign to recognize staff and raise awareness about our NCQA designation – and, more importantly, what that means to our members and potential members.

Strategy: Promote our image as "People. Understanding. Health" through all internal and external communications.

Program: Brand awareness presentations for leadership and staff, helping all staff to understand our brand mantra, to live it and to project it.

Program: Employ "People" theme in internal and external communications through 2004.

Initiative: Revise materials sent to new members to ensure a warm welcome, clear messaging and broader understanding of the total health offerings.

Initiative: "Brand" new employee orientation, so that messages are tied to the mantra. Include a brand presentation at NEO.

Strategy: Raise visibility of our physicians and the impact of Permanente medicine on the affiliated physicians we practice with. *(This strategy is key to the next three strategies).*

Strategy: Promote the fact that you can have your own physician at Kaiser Permanente.

Program: Image advertising will continue in 2004 in both the Denver/Boulder and Colorado Springs markets. The campaign will include radio, television, and outdoor for Denver/Boulder and radio and outdoor for Colorado Springs. We will continue with the "Sophisticated Medicine" campaign that we are currently running, provided it shows results

Initiative: Operations streamlining the patient-physician bonding process.

Strategy: Enlist staff, physicians, happy members and community influentials to tell our story.

Program: Colorado Springs "Harvest Project," in which Springs staff members cash in on relationships they have built with CEOs to get our foot in the door for their companies' insurance business. Similar effort under way in Denver/Boulder.

Program: Develop a pool of physicians, pharmacists and operations leaders to support sales staff at broker and group meetings.

Program: Friends of Kaiser Permanente. Revive and grow this group of happy members who agree to tell our story to friends, coworkers, influentials and the media.

Strategy: Shift media relations focus so that we are concerned more with the quality of the media mention – did we get a key message across – in addition to counting the number of mentions.

Program: More formalized issues management program will be developed.

Strategy: Focus messages and maintain alignment in communications among all audiences, from media to sales staff, operations to customer service.

Program: Integrated Communications Team, a monthly meeting of all departments that communicate. Information sharing, message development, strategies and tactics assigned. Began in 2003 and is gaining purpose.

Strategy: Help launch and promote healthy lifestyle programs and initiatives.

Program: Help develop, implement and promote new products.

Initiative: Reassess editorial focus and content of our member magazine to project more of the "Total Health" message. Pay particular attention to how we promote and list health education classes.

Strategy: Link advertising to these reputational efforts.

Program: Continue business-to-business advertising in Denver/Boulder and Colorado Springs in business publications.

Program: Personal Advantage - The Denver/ Boulder market will advertise our Personal Advantage Plans. These efforts will be coordinated through the PASS Workgroup. The efforts will include television and print.

Program: Expansion - The Denver/Boulder market is adding new medical offices in 2004 and will do print and outdoor to announce our expansion.

III. Targeted audiences

Staff and physicians

Members

Employers who offer Kaiser Permanente

Employers who do not offer Kaiser Permanente

Brokers

Media
Influentials in business
Influentials in government
General public

IV. Communication objectives

Counteract lingering misperceptions about Kaiser Permanente Colorado.
Foster perception that Kaiser Permanente is a health care organization peopled by excellent physicians and caring staff.
Draw attention to the features Kaiser Permanente offers for healthy people.
Help our staff and physicians to better advocate for our program and our style of health care.
Help sales and marketing grow membership.

V. How will the plan help reposition Kaiser Permanente to People. Understanding. Health

We do so by harnessing the power of 4,500 staff and physicians, by focusing them on stories that are on message and by delivering the brand. We also integrate this effort with the messaging we project externally via member communications, medical office operations, media relations, advertising and community relations.

VI. What metrics will help us measure success?

Market Tracking Survey questions dealing with non-member perceptions.
Audience surveys before, during and after advertising campaigns.
Media hits and assessment of positive, negative or neutral (based on whether our message was contained in the report)
Survey of staff and physicians.
People Pulse scores.
Number of new communication channels opened (e.g., editorial boards, physician placement on regular broadcast programming)
New groups offering Kaiser Permanente; membership growth.
Colorado Springs non-member perception survey to assess the different attitudes there.

VII. How will nationally leveraged resources be integrated?

Shared Services will have a seat at our monthly Integrated Communications Team meetings to get a better sense of the context of our communications issues, and to help us develop ideas and use resources already developed.
Continued and enhanced communication with national media relations staff and issues management staff; contribute to Intranet sites that are developed to share ideas and best practices.
Advertising efforts are coordinated through Shared Services. Kaiser Permanente Colorado will be running the national image campaign, using print ads developed by Shared Services and using national creative for Personal Advantage efforts.
Draw on nationally developed communications tools for implementation of HealthConnect and new products.
Coordinate new member materials with MarCom committee.
Use brand toolkit to help raise brand awareness among staff.
Collaboration with Labor Management Partnership.
Draw on Nationally developed communication tools for new products and the KP card.
Use KP.org and supporting communications materials in communications with members, prospective members, employers, brokers and media.

VIII. Deliverables and major milestones.

Reputation task force to have list of projects by end of 2003, for roll-out in 2004 and beyond.

Refocused, doctor-enhanced media strategy in place by end of 2003.

Top 10 in Health campaign launched in October and carrying through September 2004.

Continue Integrated Communications Team and strengthen it.

Develop communications tools to roll out deductible/coinsurance products by the end of 2003.

Through 2004, develop communications plans for next generation products.

Develop communications tools to roll out HealthConnect and integrate that with external messaging.

Formalize issues management process by end of 2003.

Revive Friends of Kaiser Permanente in early 2004.

Member magazine refocused by 2nd issue of 2004.

New member material updated beginning end of 2003.

Continued brand awareness presentations to leadership and staff.

“Branded” new employee orientation.