

Health Rights Hotline Media Plan Options

Purpose:

The purpose of this document is to provide a review of media options for the Health Rights Hotline communications plan.

Considerations:

When making a media selection recommendation the following must be considered:

- Target Audience (Definition. Ability of Television, Radio, Out of Home, and Newspapers to reach and impact target)
- Geographic distribution
- Creative Strategy
- Budget

Target Audience:

The target audience for the Health Rights Hotline includes everyone involved in the managed health care system. It doesn't matter if coverage is provided by the government or through private sector. Thus, the universe of the target would include people of all ages, ethnicities, income levels, and social status. Television is the best medium to reach a broad audience. The absolute numbers are larger, while the ability to segment by program type still available.

Radio:

Qualitative Factors: Best used to target very tight target audiences. Radio has the ability to deliver teens via "pop" stations, mature audiences via "talk radio", sports enthusiasts via "sports radio." To reach the totality of the Health Rights Hotline audience a purchase of seven to ten stations in four county market would be the minimum buy. This would result in fewer spots on each station, played less frequently, thus minimizing impact.

Creatively, radio is extremely visual, yet it's more two dimensional than three. Its ability to deliver emotion is limited.

Quantitative Factors: Radio will have a maximum reach of 75% of the target audience (adults 18+) on a weekly basis. To maximize cume, (total audience reached), 10 to 12 stations would have to be purchased with each station receiving the same number of spots on a weekly basis. With the current budget this would be cost prohibited. The current budget would allow for a minimum number of spots per station with the result of too little frequency per station and overall.

Out-of-Home:

Qualitative Factors: Out-of-Home is defined as any medium a viewer is exposed to *out of their home*, with the exception of radio. It includes: outdoor bulletins (painted bulletins, 30 and 8 sheets); transit (bus backs/ sides, rails advertising, bus and rail interiors, bus and rail shelters, cab tops).

Out-of-Home is usually utilized as a reminder, secondary or tertiary medium due to creative limitations. It is also used to *extend* reach as opposed to *create* reach. By this we mean that Out-of-Home can extend reach already established in other mediums such as television or radio.

Creatively, Out-of-Home is very limited. Four to eight words and a visual is a standard used in developing messages for Out-of-Home.

Quantitative Factors: 42% of all auto traffic is done on local streets in the Sacramento area, effectively missing the majority of Out-of-Home media. Sacramento has an efficient traffic control system which results in an average commute time of 10-20 minutes. Those with commute longer than 20 minutes represent less than 28% of the work force. A 50% showing would cost approximately \$12,000 per month plus production. Even if budget allowed for this expenditure, no other medium would be afforded in the mix and, as stated previously, Out-of-Home is a reminder medium, not a lead medium.

Newspapers:

Qualitative Factors: Newspaper readership has been declining for many years. They are strong at reaching people 50+ but extremely weak at reaching 18-49 year olds. While the audiences have gone down, the rates have gone up, making newspapers one of the most inefficient mass vehicles available.

Quantitative Factors: Newspaper penetration in the Sacramento DMA has been declining consistently as suburban growth continues. The Sacramento Bee reaches just over 38% of the area population. 60% of that readership is 50+. The second most read paper in the Sacramento area is San Francisco Chronicle with about 5% penetration. Additionally, the proliferation of small community and weekly papers in the area add to the fragmentation making newspapers very inefficient.

Television:

Qualitative Factors: The message of the Health Rights Hotline is emotional in context. We are dealing with people who are going through a stressful time with the health care system. They may have been denied coverage, denied a referral they feel is important, they may be the victim of a medical group or health plan bankruptcy. Thus, the ability to reach them at an emotional level with messages that stimulate them to call the Hotline is paramount. No other medium has the emotional power television.

Quantitative Factors: Television in the Sacramento markets effectively reaches 90% of adults on a weekly basis. The average time spent viewing is four hours per day. Due to the competitive nature of television marketplace, the rates are very efficient. Television is the only medium that effectively covers the entire market area with a one medium buy. Television provides the opportunity to "cherry-pick" programs so that waste is minimized and frequency against the target is maximized.

Geographic Distribution:

Given the four county marketing area of the Health Rights Hotline, the most efficient means of reaching our target is through mediums that effectively cover the four counties. Only television effectively reaches all four counties. Sacramento radio and, to a much lesser degree, The Sacramento Bee, have penetration in all four counties but their distribution is not strong enough to warrant consideration.

Creative Strategy:

The creative strategy for Health Rights Hotline is to capture the emotion that people go through as they encounter problems with their Health Care. We believe that through the exhibition of specific problems we can stimulate Health Care consumers to call if they feel they have similar problems.

Budget:

Normally, a budget the size of the Health Rights Hotline would not be a candidate for television. One could argue that we should pick a more specific audience and use radio. Or pick one of the four counties and just use transit. While these considerations may appear to make monetary sense, they don't meet the criteria of delivering powerful, impactful and stimulating messages.

We have to be very creative in how we buy television for The Health Rights Hotline. We have to look at short form (15 second spots vs. :30 second spots). We have to buy programming that is very broad, large and yet affordable. We have scheduled it for maximum impact (bookended 15's vs. stand alone 30's).