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Congress attempts to tackle jobs problem by not creating any jobs.

VMS LIABILITIES TOP $8 MILLION
The video monitoring giant, which closed its doors in Aug., has now filed for Chapter 7 bankruptcy protection.

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A new U.S. class action suit against News Corp. may take the company’s high-profile hacking scandal overseas.

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Why “targeted” outreach in healthcare communications doesn’t always have to mean “limited.”

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Despite numerous barriers, health and life sciences companies can participate and engage in social media.

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A scathing report by a House Committee claims green jobs are just propaganda used by the Obama administration.

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EDITORIAL

U.S. unemployment reveals new lows in desperation

Jobs, jobs, jobs. It’s all anyone wants to argue about anymore. As current protests on Wall Street grow to Arab Spring proportions, it’s becoming increasingly clear that Americans’ contempt for our pitifully askew income distribution have evolved to embrace a new dialectic.

America isn’t a third world nation (not yet, anyway) but disillusionment with our current economic policies has resulted in a new urgency. We’re tired of seeing those at the top run the country into bankruptcy — and worse, make money from it — so the jobless, the out-of-work and recently foreclosed can pay for it with increasingly fewer resources and no recourse.

To borrow a tired line, America needs to get back to work. And party x (add your political denomination here) knows just how to do it.

It came as no surprise then, that when President Obama addressed a joint session of Congress in early September to discuss his recommendations for a bipartisan committee to reduce the deficit and create jobs, there would be conservatives ready with a set of predictable, preassembled raillery. What was a bit of a shocker was that Obama’s speech came off as such a Jedi mind trick to those waiting to pelt partisan tomatoes. So much of his plan is taken from the Republican playbook it becomes almost impossible to deride it without sounding completely, unreliably, insanely capricious. But hey, they’ll do it anyway, because agreeing with the guy is just not an option.

In a nutshell: The $447 billion plan includes an initiative to reduce deficits by more than $3 trillion over 10 years. It also includes a series of hefty tax incentives for businesses to hire more American workers. Businesses could receive tax credits of $4,000 for hiring “long-term unemployed” workers, or those who haven’t had a job for at least six months. The plan also proposes cutting in half payroll taxes businesses currently pay on its first $5 million in wages. Other provisions include $25 billion to refurbish schools, $35 billion to avoid layoffs among teachers and first responders, and $60 billion for new infrastructure development such as repairing roads and bridges. Finally, Obama indicated he would propose changes to the tax system to raise $1.5 trillion in revenue over 10 years. This includes a higher tax rate for millionaires. Quick, someone exhume the body of Trotsky. This is clearly “class warfare.”

Predictably, further cuts will include reforms to popular “entitlement” programs such as — you guessed it — Medicare, which now seems forever destined to play the role of sacrificial lamb. On September 19, the Obama administration said the deficit-reduction portion of his plan would now include more than $320 billion in cuts to the projected growth of Medicare and Medicaid over 10 years. Premiums and deductibles would go up for new beneficiaries, federal support of states for treating low-income Medicaid recipients would go down, and seniors who receive care at home would be required to make co-payments. Whitehouse Budget Director Jack Lew said the plan would be implemented with “a lot of pain.” No kidding.

Meanwhile, things are looking even worse for American insured. The New York Times reported September 27 that health insurance for many Americans increased more in 2011 than it had in previous years, growing by an average of 9%. According to the report, the cost of coverage has now almost doubled since 2001.

Senate Majority Leader Harry Reid referred to Obama’s proposal as a “litmus test” for Republicans. How right he was. Congress’ inability to get anything done anymore — their proclivity to fight U.S. unemployment by … wait for it … not creating jobs — is a working metaphor for our stalemated political environment. Given that Obama is acting like such a Republican nowadays, the question isn’t whether the “party of no” will agree this time. It’s what excuse they’ll use.

Senate Minority Leader Mitch McConnell said Obama’s “so-called jobs plan” is actually “a re-election plan.” Michele Bachmann said Obama’s ideas have “been tried and failed before,” with backing policies that “have cost the American people both jobs and prosperity.” Surprisingly, House Speaker John Boehner said there are parts of Obama’s plan that “merit consideration.” House Majority Leader Eric Cantor also offered tepid praise, telling CNN he believes “there is a lot of room for commonality.” Both have since appeared to rescind their uncharacteristic cordiality.

Obama has got to learn that you can’t please everyone. He’s got to stop trying to sell Republicans ideas they came up with in the first place. Considering Obama’s planned cuts to health services come at a time when the U.S. economy continues its downward spiral while insurance grows prohibitively expensive, is this really the right thing to do? And what does it say about our priorities? If we fought U.S. poverty the same way we overthrew regimes in the Middle East, we would’ve bombed unemployment into submission by now.

— Jon Gingerich
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VMS liabilities top $8 million

Video monitoring giant VMS surprised the PR industry when it shut its doors in late August. The 30-year-old media monitoring company has since filed for Chapter 7 bankruptcy protection in federal court, listing nearly $17 million in assets and liabilities of more than $8 million.

By Greg Hazlcy

The company generated $50.3 million in revenue in 2009, $47.5 million in 2010 and $26.7 million through July 31, 2011, according to August 31, 541-page filing.

Hundreds of unsecured creditors are listed in the filing with the U.S. Bankruptcy Court for the Southern District of New York. Capitol One, which cut off financing to the company in August precipitating its shutdown, is the company’s largest secured creditor with $5.6 million owed, according to the filing.

Unsecured creditors, which the filing indicates will not likely be paid, include health plan provider Horizon Blue Cross/Blue Shield ($174,000), advertising tracking software provider Evaliant/Kantar Media ($186,000), Nielsen Media Research ($144,000), data center company Peak 10 Xodiax ($206,000), IT consulting firm Scandent Group ($201,000), PR services provider TEK Group International ($124,000), Cisco Systems ($92,000), Clear Channel Management ($109,000), FedEx ($50,000), and several PR firms like Ketchum ($10,000).

VMS also lists 97 pages of contracts not yet fulfilled, ranging from APCO Worldwide to the Zoological Society of San Diego.

VMS said among its $17 million in assets are accounts receivable totaling $6.4 million, with another $9.7 million in office equipment and supplies.

Among top executive compensation outlined in the filing were CEO David Stephens’ pay of $269,000 from October 2010 through August 2011, chief information officer Gary Louw, who earned $260,000, and professional services division president James Waggamon, who took home $192,000 during that period.

VMS’s board of directors, including Robert Waggamon, Frederick Wynne, and Sandra Wynne, signed off on the bankruptcy after a meeting August 24. Law firm Cole, Schotz, Meisel, Forman & Leonard, and financial advisory firm J.H. Cohn are working the bankruptcy for VMS.

VMS closure shocks industry

VMS, which was a dominant player and icon in the PR services sector for three decades, shut down operations and laid off its entire staff on August 26.

Staffers were told of the news during a noon meeting and conference call. Company executives spent the day before weighing options after Capitol One said it would no longer fund operations.

VMS CEO David Stephens, who took over for Wengryn last fall, told staffers that high costs from rent agreements, coupled with VMS' lack of market share in the social media monitoring space were among factors contributing to its downfall.

“I think people are shocked,” said Darren Drevik, Communications and Marketing Director of VMS who joined the company last year.

Staffers were paid through August 26 but were not offered severance or ongoing health benefits, said Drevik. Unresolved payments like expenses, as well as communications with customers, will be handled by a trustee to be appointed by a bankruptcy court.

VMS, or Video Monitoring Services of America, provided videotape copies of news clips, which were a PR industry staple for decades, but the evolution of digital video made for cheaper alternatives and a rise in competition from companies like Vocus, Cision and Critical Mention, among several others, in recent years. VMS also monitored advertising content.

Wengryn joined VMS as its chief financial officer in 1999 and was tapped as CEO three years later. He handled the company’s transition from providing tape of broadcast clips to a services and consulting business steeped in monitoring.

The company was founded by Robert Cohen in 1981. He died in June at 82.
News Corp. hacking scandal now shifts to U.S.

News Corp. may face a U.S. lawsuit over the high-profile phone hacking by its now shuttered News of the World.

By Kevin McCauley

The lawyer representing people who claim their phones were hacked by News Corp.'s now defunct News of the World tabloid are pushing the probe to the U.S.

Sky News reports the move is “bad news for News Corp. and its boss Rupert Murdoch as well as his son and corporate heir James.”

Mark Lewis said Sept. 23 that he plans to “raise issues about the role of a parent company over its subsidiaries.”

New York lawyer Norman Siegel, who represents families of 9/11 victims, has been retained to gather depositions from the Murdochs and News Corp. board members concerning allegations that NOTW staffers bribed British police and other “malpractices.”

Lewis will determine if a class action suit against News Corp. is warranted based on U.S. corruption laws that make it illegal under the Foreign Corrupt Practices Act to pay bribes to overseas officials. A potential class action suit would be filed in New York.

U.S. Justice Dept. officials, according to The Guardian, have already requested information from News Corp. about alleged payments to British police.

Meanwhile, News Corp. has agreed to pay $4.6 million to the family of Milly Dowler, the murdered 13-year-old hacking victim, and a charity to settle the claims of the Dowlers.

Media Briefs

GOOGLE BUYS ZAGAT

Google has acquired Zagat, the 32-year-old survey company, run by Nina and Tim Zagat. They plan to remain as co-chairs of the Zagat Survey. The move puts the search company into the content game.

In announcing the deal, the Zagats said Google’s resources will enable aggressive expansion.

The Zagats spent time with Google senior management and reported they “know that they fully share our belief in user-generated content and commitment to accuracy and fairness in providing consumer with the information necessary to make smart decisions about where to eat, travel and shop.”

Zagat has surveys for 13 categories and for more than 100 cities.
Advocacy and intimacy: the delicate balance of outreach

Under increased regulatory scrutiny, healthcare clients are seeking insightful ways to reach stakeholders while heeding the guidelines of recent industry reforms. Here’s why “targeted” outreach in healthcare communications doesn’t always have to mean “limited.”

By Gil Bashe

The recent focus on healthcare reform and concerns about safe and appropriate access to therapy have heightened both the scrutiny of, and the need for, effective communications in the healthcare space. For companies in the consumer health, pharmaceutical, biotech, diagnostics and medical device fields, communicating with physicians or patients is no longer enough. In order to ensure medical solutions reach the patients who need them, companies must consider not only how to reach consumers, but how to influence the broader environment.

Whether a broad-based grassroots advocacy campaign, designed to create a groundswell of support, or a targeted education session for “grass-tops” influencers, creative communications strategies can maximize outcomes for companies large and small.

A new age for advocacy

Health advances — prescription and consumer — fall short of their potential without support and awareness. Though picking up the dinner tab is now out of bounds, forging ties with third-party physician, patient, policy and payer groups remains critical. It is the nature of the relationship, however, that must be carefully considered.

Senator Charles Grassley — one of the sponsors of the 2009 Physician Payments Sunshine Act, later expanded to include a wide range of health professionals and patient groups — wrote 18 months ago to the National Alliance on Mental Illness: “I have come to understand that money from the pharmaceutical industry shapes the practices of nonprofit organizations which purport to be independent in their viewpoints and actions.”

Since then, he has followed up by probing scores of professional and patent associations to examine pharma/third-party connections.

Past advocacy efforts often relied on financially-based relationships to increase disease awareness, strengthen mutual support and fund clinical or outreach programs. In today’s regulatory environment, officials are seeking to limit the influence of financial contributions by increasing the requirements for transparency. The penalties to industry for non-compliance will be steep — fines of up to $10,000 for each $100 “transfer of value” not reported, and up to $100,000 for knowingly failing to report — with a cap of $1 million annually. As of September 30, 2011, industry payments to third-party groups will be made public on a searchable website.

But the need for increased transparency does not negate the important role of third-party partnerships. These relationships are essential to disease education and improving therapy adherence. Alliances between industry and patient or physician advocates help the medical community recruit candidates for clinical trials, enable people to find effective treatments for their conditions, and help families navigate an increasingly complex health system.

True advocacy has always been more than just writing a check. In a way, the new regulations have removed the “being pressured to give” conversation for biopharma companies. Now, rather than making a donation, communications professionals must consider thoughtfully — how can our company’s communications and outreach efforts advance patient safety and public health?

One example includes investing in improved information for patients, physicians and even payers. With consumer access to a vast ocean of internet information creating a public health dilemma — what’s fact and what’s fiction? — advocates and public educators are a lighthouse for truth.

Consider what would happen to cancer patients in a time-critical situation if therapies were not readily available. Where would patients turn, if a treatment for a rare disorder had no patient-assistance program to help cover cost? Or, if physicians needed to better understand a side-effect profile of a certain drug in patient types? These issues are critical to patients, providers, and business — making advocacy a central player.

Advocacy in a complex health system has finally earned a dedicated seat within health and pharma company disease franchises. Within the parameters of financial transparency, much can be accomplished to unify, bolster and advance the interests of the communities healthcare companies serve. Creating a positive environment sets the stage for effective consumer outreach.

Harnessing “grass-tops” outreach power

The consumer outreach “yin” to broad-based advocacy efforts’ “yang” is intimacy: high-level, targeted communications outreach. “Targeted” doesn’t have to mean a smaller effort; nor does it mean dialing back on potential impact. Identifying key “grass-tops” influencers, and reaching them directly via creative interactions, allows companies to generate a valuable ripple effect and gain critical counsel.

When launching a new product, first impressions are lasting impressions. By engaging key influencers, a well-executed product launch event can build company reputation and enhance consumer understanding. Building advocacy isn’t only for complex diseases and treatments. Today, consumers are looking for new and credible healthy choices.

One example of such targeted outreach is a re-thinking of the traditional consumer product launch. An intimate, private event to unveil the new product can be designed to attract tipping-point community leaders, gain media cover-Continued on next page
age, increase consumer awareness, drive website traffic and develop relationships with health-conscious leaders who influence their peers. These high-level venues provide an in-depth look at the product for decision makers in top-tier media markets while creating a memorable, informative experience. Selectively targeting one city in each launch phase also creates the in-person opportunity to drive word-of-mouth, and gain valued insight. Engaging business leaders, journalists, bloggers and prominent community leaders at the event gives these “grass-tops” influencers a firsthand experience with, and knowledge of, the company’s health contributions. Some recommendations:

Make it interactive: In addition to inviting leaders in the community’s social media scene, encourage attendees to blog, tweet and share information during the event.

Think creatively about attendees: A creative, engaging event is only part of the formula for success — the participants must be the right fit. Consider the target end-user (or payer), and work backwards: who do they listen to?

Where are they getting their information? Ultimately, seeking to “influence the influencers” will achieve great bang for the client’s buck.

Reaching key audiences and achieving brand success is not easy in today’s environment — but it is all the more important to help ensure patients and their caregivers can connect with needed solutions, and find supportive communities.

The new standards of transparency remind us not only that honesty is the best policy, but that true advocacy — standing up for those in need — can be achieved more completely with coordinated outreach that goes beyond the fundraiser. And to help connect clients’ new healthcare advances with those who will benefit most, targeted communications to key influencers can achieve results far more effective and efficient than broader consumer-based campaigns of yesteryear.

By keeping communications in balance, we can help our clients fulfill the potential of health advances.

Gil Bashe is Executive Vice President and Health Practice Director at Makovsky + Co in New York.

The Centers for Medicare and Medicaid Services has awarded multiyear, open-ended PR contracts to five agencies, following an eight-month RFP process.

Nine firms pitched for the lucrative pacts. Fleishman-Hillard was chosen to join incumbents Ketchum, Ogilvy PR Worldwide, Porter Novelli and Weber Shandwick as the large division of the US Dept. of Health and Human Services’ go-to firms for PR work for up to seven years. The Washington, D.C., offices of each firm will handle assignments for the Maryland-based CMS.

The federal agency runs programs affecting 102 million Americans and will be expanded and revamped under the Obama administration’s healthcare overhaul. Its $486 billion 2011 budget is requested to rise to nearly $507 billion for 2012. CMS issued an RFP in December to review its PR roster, which previously included the four firms.

The process to select a group of firms from which to bid out or assign projects is known as IDIQ, or indefinite delivery/indefinite quantity. The work is expected to include a range of national, local and regional campaigns incorporating PR, social media, advertising/PSAs and other outreach.

F-H, Ketchum and PN are part of Omnicom, while Ogilvy is a unit of WPP and WS is owned by Interpublic.

The federal agency last reviewed the accounts in 2006.

PR News Briefs

MEDICARE TAPS QUINTET

The Centers for Medicare and Medicaid Services has awarded multiyear, open-ended PR contracts to five agencies, following an eight-month RFP process.

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Sometimes your biggest challenges aren’t in the laboratory.

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Social media can engage healthcare dialogue responsibly

Social media has created enormous opportunities for marketers, advertisers and PR professionals to deliver messages in entirely new ways. However, true “social” media — where participants engage in a two-way dialogue — poses significant challenges for highly regulated life sciences companies. While the potential barriers and risks are daunting, a number of pharmaceutical, biotechnology and medical technology companies are finding ways to engage in “compliant” social media initiatives that meet corporate communications objectives while improving the lives of patients and caregivers.

How big is social media? The population of Facebook is now estimated to be more than 500 million, which is approaching the size of the entire population of the continent of North America. YouTube receives an estimated 3 billion views per day — the equivalent of nearly half the world’s population watching a YouTube video every day. Twitter has played a role in supporting popular uprisings throughout the Arab world, and has become a critical component of the news cycle worldwide both in delivering breaking news and adding context to developing stories.

Prior to the emergence of social media, communicating via traditional media channels occurred primarily in one direction. Corporate sponsors delivered approved content over print, broadcast and digital media channels that offered no real opportunities for two-way communication. In the highly regulated life sciences industry, companies followed guidance from the Food and Drug Administration’s (FDA) Division of Drug Marketing, Advertising, and Communications (DDMAC) to avoid making unsubstantiated claims and engaging in off label promotion.

To date, the FDA has failed to provide clear guidance to the industry on how it will regulate social media communication. After hosting a public hearing on November 12-13, 2009 on the promotion of FDA regulated medical products using social media, the agency has gone quiet on this issue, and has not followed up with any policies or guidelines.

One of the primary concerns that everybody has regarding social media and medical products is what happens if a patient or caregiver reports an adverse event using a social media platform, and whether the product manufacturer should be held responsible for monitoring and responding to adverse event reports on social media sites.

In the absence of any real guidance from the FDA on this issue, most life sciences companies have been careful to provide “fair balance” or important safety information and warnings, whenever mentioning their product on a social media site. There are different ways to do this on Facebook and YouTube, however, Twitter presents a challenge since users are limited to 140 characters. Despite these and other barriers, a number of global life sciences companies are actively engaged in social media.

A blessing and a curse

On August 15, 2011, Facebook eliminated a special exemption for pharmaceutical and healthcare pages that allowed them to block all commenting on their wall posts. While a number of pharmaceutical company-sponsored Facebook pages have always allowed comments, some companies responded to the August 15th Facebook policy change by deleting their pages, rather than risk receiving comments that might make them liable in the eyes of the FDA. The good news is that the number of companies who have decided to remain on Facebook and engage in two-way communication is much larger than those who have opted out. Facebook has added functionality to its pages that allow for easier inclusion of fair balance information so that it always appears as a footer on the page.

These companies have demonstrated a true understanding of social media. Being on the Internet is one thing, engaging in two-way communication is entirely different. For life sciences companies operating in a highly regulated industry, and with no real guidance from the FDA on how to proceed, two-way communication involves taking risks. Social media players have calculated that the benefits of engaging in social media — better educated and informed patients, corporate and brand loyalty, and credibility — outweigh the potential risks.

A match made in heaven

In many ways, social media was made for public relations, and vice versa. One of the primary benefits of public relations, in comparison to other marketing disciplines, has always been the ability to communicate complex messages, to build a compelling story, and to provide context. Many truly great public relations programs are designed to build value over time as messages and content evolve. Evidence based arguments are made. A story unfolds. Complex issues are clearly outlined. Key publics are engaged in different ways.

The value of a Facebook page, a YouTube channel, and a Twitter feed increases over time as new, multimedia content is added and new information evolves.

These channels serve to build loyalty, credibility and followers who will then act as advocates. The ability to develop a story over time, to weave in new messages, to engage with customers in meaningful ways and respond to their feedback are all features of social media, and they have been at the core of public relations since the early 20th century.

The true challenge for public relations professionals is not just to understand social media, but to apply it in ways that are strategic and that deliver real value to the companies we work with.

David Avitabile is President of JFK Communications.
EFFECTIVE PR HAS A LOT TO DO WITH MANAGING CONTRADICTIONS.

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‘Old School’ healthcare PR in a digital environment

Several tried and true practices from yesterday’s PR playbook are still relevant when tackling healthcare communications in today’s fast-paced and social world.

By Georgette Pascale

As we’ve all heard a million times, the world of communication has changed. We know instantly an individual reaction to an event happening half way around the world. The public relations industry has raced to adapt to the fast moving virtual world as magazines and newspapers reject the price of printing, and opt to be found on your iPad.

The healthcare industry is subject to laws and regulations that extend to a company’s PR communications, and this has created a new hybrid space where it is essential to marry “old school” PR tactics with new media expertise. At Pascale Communications, we’ve found that practicing traditional techniques enables us to help clients move into new media spaces.

Know your stuff

With some industries, it may be effective to create keyword rich articles and shop them around to a variety of publications or post search engine optimized articles on blogs, hoping to garner lots of coverage and thus attract the attention of opinion leaders as channels for the doctor thought leadership with specific key audiences or post search engine optimized articles with a specific trade journal in mind. The message is customized to the publication and the client, and relies heavily on the expertise of the KOL.

Consumers today are more educated about their health than ever before, in large part due to multimedia and sites such as WebMD. We can help companies take advantage of that by creating thought leadership positions around disease states and branding their device, procedure or pharmaceutical offering with appropriate dialogue in the social media space.

Connect with people

In Malcolm Gladwell’s book “The Tipping Point,” he talks about people with a truly extraordinary knack of making friends and acquaintances. I don’t know if any analysis has been done of public relations professionals, but it seems most successful PR professionals would have to fall into the category of connectors. Partnering up with folks and hooking people up — that is where the heart is of any successful business, especially in the world of healthcare. This is true not just with publications and KOLs, but also with the team at Pascale. We are all very distinct and bring different talents to the table, creating a wonderful synergy. This allows us to maintain a presence in the trade journals for our clients, while also helping them create a twitter account and explore new opportunities for connecting physicians, potential patients and editors.

Social media, in reality, is just the fastest way for connectors to expand their circle of acquaintances and link up new groups. It allows us to connect doctors, patients, consumers interested in healthcare, journalists and companies even easier by sharing news articles and new research or initiating transparent discussions of disease states. Sites such as Facebook and Twitter allow us to create thought leadership with specific key opinion leaders as channels for the doctor to discuss subject matter/content with the public and “Twitterviews” or sponsored “Tweetchats” are just new media’s version of the traditional press conference or expert Q & A.

Maintaining personal relationships

With everyone’s busy schedules, it’s easy to rely solely on conference calls and emails, or to think that enough information disseminated on the "world wide" web is sufficient to get your voice out there. However, the creation, fostering and maintenance of personal relationships is a trademark at PC. My company is entirely virtual, which allows us to be very efficient and effective. However, we have in-person meetings with the team and I’m always encouraging people to pick up the phone rather than email. I visit my clients in person and I write personal thank you notes. People need that tangible connection and face time to feel valued and understood, and it can’t always be replaced by a conference call or an email.

The client is your most important relationship. This may seem obvious, but all too often you hear that the executive that pitches a company is very seldom the person who works on the account. I personally oversee every account and have a hand in the strategy. I participate on the conference calls and always make myself available to clients as well as to my team members. This involvement allows me to match the diverse needs of my clients with the specific talents of my team members, creating a positive situation for everyone.

Healthcare PR is a dynamic field, one that is combining new and old methods of communication. However, the center or it all is still relationships, relationships, relationships. Social media is still a very difficult beast in the healthcare arena and many companies are hesitant to throw their hat in the ring. By connecting experts in traditional media and social media our team can maintain the balancing act of being cutting edge while still mastering traditional outlets. Social media means that both the PC team and our clients have that many more relationships to maintain, but we bet you’ll think the effort is worth it.

Georgette Pascale is President and CEO of Pascale Communications, in Fairfield, CT.
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Adapting to new regulations in the healthcare world

Recent healthcare reform legislation is focused on enhancing the quality of patient care while also decreasing that care’s cost. To demonstrate that products and services meet the new paradigm, companies in the healthcare industry must change the way they market and sell their products.

By Catherine Wolfe

It’s estimated that $2.5 trillion — or 17.6 percent of the U.S. gross domestic product — is spent on healthcare. When compared to other developed countries, the U.S. spends twice as much on healthcare each year but without the same results. The 2010 Patient Protection and Affordable Care Act (PPACA) focuses on transitioning the U.S. healthcare system from volume-based to value-based. The challenge presented by the implementation of the PPACA is that companies in the healthcare industry must be able to demonstrate to customers how their products help to improve quality of care, reduce costs and enhance patient outcomes.

The conversation starts with listening

To be able to successfully adapt to a changing industry, it is important for companies to first listen to their customers and then identify needs that can be filled. Take for example diagnostic imaging equipment provider, Toshiba America Medical Systems, Inc. Toshiba serves the hospital, medical group and imaging center market. These sites use Toshiba’s CT, MRI, X-ray, vascular and ultrasound systems to diagnose and treat patients for an array of conditions. In the case of the company’s newest MRI system, Vantage Titan 3T, doctors are able to perform body imaging more easily and quickly than on similar systems. A few years ago when Toshiba saw the healthcare environment beginning to shift, the company put into place a healthcare economics team to review new legislation and determine potential impacts to the company and its customers. When the PPACA was passed, customers began asking, “What does this mean for me?” It quickly became apparent that Toshiba could fill a need by moving from being just a technology provider to also being an educator, helping customers better understand the new healthcare landscape.

Educate internal customers first

As Toshiba’s healthcare economics team was already tracking changes in the healthcare environment and analyzing their potential impact, it was a relatively easy transition to begin sharing this information. So, Toshiba began to educate its sales team so they could become a knowledge resource.

Tools were created, explaining key legislation and highlighting potential impacts to customers. An internal newsletter, done in question and answer format, was created, breaking down complicated legislation into easy-to-comprehend ideas. This effort was complemented by internal videos using visual aids and assessment activities, to measure comprehension.

Focus on one concept at a time

Similar to the tools produced for the sales team, customers were given question and answer sheets, explaining what would happen as healthcare reform advanced, how it would directly affect them and how Toshiba could help. These sheets were accompanied by a series of online videos called Conversational Healthcare, which further explained changes. Most importantly, each sheet focused on only one concept at a time so as to not overwhelm the audience.

By analyzing the potential impact of coming changes, Toshiba could tell which ones would be of most interest to their customers. Of the many healthcare legislation changes introduced recently, episode of care (EOC), also referred to as episode-based payment or bundled payment, is expected to transform healthcare delivery and will have a significant impact.

In testing since 2009, EOC encompasses a patient’s entire treatment for an illness or “episode.” For example, if a patient has a heart attack then everything done to diagnose and treat that condition is all grouped together into one clinically-defined episode of care. Using these episode of care groupings, the provider reimbursement is determined based on the expected costs for that care. Recognizing the importance of customers understanding this concept and wanting to provide education beyond the videos and question and answer sheets, Toshiba launched an entire campaign.

Highlighting successes

While explaining an idea helps people to understand it, showing an example of it in action helps people to envision how they could implement it for themselves. To illustrate how the company’s products have been used successfully by customers, Toshiba partnered with Kaleida Health Stroke Center at Millard Fillmore Gates Circle Hospital in Buffalo, NY. The customer has effectively used Toshiba’s Aquilion ONE CT scanner to improve patient outcomes, enabling them to release more patients directly home rather than to another healthcare facility while also reducing costs.

The campaign was strategically planned around the industry’s largest annual trade show, RSNA (Radiological Society of North America). The objectives were to educate healthcare providers about EOC, explain what they needed to do to succeed and showcase how Toshiba’s technology can help to continuously enhance patient care, reduce costs and improve patient outcomes.

Prior to the show, traditional advertisements and press releases along with email marketing campaigns piqued interest and enticed show attendees to visit Toshiba’s booth.

During the show, Toshiba had an EOC theater inside its booth where daily presentations explained how medical imaging fits into the future of healthcare. Additionally, the booth had interactive displays explaining how leading healthcare organizations successfully use an EOC model. Customers were also provided with collateral to take home, which further explained the EOC concept and the story of Millard Fillmore’s achievement.

The success of the EOC campaign has made it evident that healthcare providers still crave information about coming changes. For companies in the healthcare industry working to adapt to the new environment, informing customers about new legislation is key. By continuously listening to customers and identifying needs, educating internal audiences, and demonstrating how products can provide the best solution possible, healthcare industry companies will be able thrive.

Catherine Wolfe is Senior Director of Corporate and Strategic Communications for Toshiba America Medical Systems.
Publicis acquires healthcare PR giant

Publicis has acquired Massachusetts healthcare and tech PR firm Schwartz Communications. The French ad/PR conglomerate said Schwartz, including its Boston, San Francisco, Stockholm and London offices, will be folded into MSLGroup under the name Schwartz MSL.

By Greg Hazley

As a result of the deal, Publicis said MSL will now effectively become the largest agency in the Boston area, with 100 staffers.

The 21-year-old Schwartz is currently ranked the No. 10 independent firm in the country according to O’Dwyer’s 2011 rankings or PR firms, with more than $25 million in revenue and 180 staffers last year.

The Waltham, Mass.-based firm was also ranked the sixth largest independent PR firm in the U.S. for healthcare revenues. According to tax documents submitted by the firm to O’Dwyer’s, the company brought in $10,336,424 in healthcare fees during 2010.

Clients for Schwartz Communications include GEO Healthcare-Americas, SimplyHired.com, Epocrates, and Accuray. The company is also ranked as the second largest independent PR firm in the San Francisco area, and claims the sixth largest spot for tech PR in the United States.

MSLGroup chief Olivier Fleurot said the deal strengthens Publicis’ PR network in a number of fields, singling out technology and especially healthcare, which, Publicis noted, is expected to grow by more than 50% through 2020.

Schwartz president Bryan Scanlon, and COO Ari Milstein will run Schwartz MSL, reporting to Jim Tsokanos, president of MSLGROUP Americas, Publicis said, while European offices will be integrated immediately into existing MSL operations.

M&A consulting firm StevensGouldPincus initiated the transaction, introduced the buyer and seller, participated in the negotiations and acted as advisor to Schwartz, according to partner Art Stevens.

Publicis said in July that organic growth at its PR operation was up five percent in the second quarter with its U.S. operations bolstered by social media and healthcare assignments. The company has made several PR acquisitions this year focused on Asian markets, including China PR giant Genedigi group, Taiwan’s Interactive Communications and, last November, Beijing-based Easwei PR.

Schwartz Comms. founders Steve and Paula Mae Schwartz set up shop in 1990 but stepped back from day-to-day operations in 2004 when they started a film company, Chockstone Pictures, which adapted the Cormac McCarthy Pulitzer-winning novel “The Road.”

They are currently producing with another company “Cogan’s Trade,” starring Brad Pitt.
Health reporters tell PR pros what makes a good story

Awareness months are over-hyped, photos and charts are underutilized, and Twitter is a Godsend for journalists looking for unusual and developing news stories. These were just a few of the insider tips revealed at a September 13 Publicity Club of New York panel, where communicators heard from journalists working in today’s medical and healthcare beat.

By Jon Gingerich

Reporter for Bloomberg TV. “Everyone is nervous. They don’t want to be bothered. If you have a dynamic, interesting character it would be someone ideal to tell a story. If a recall happens, invite us to the plant. Show us how the company is doing.”

Pettypiece also said that because TV is intrinsically visual, a lot of times good artwork makes or breaks a story. Photos are always good; so are charts and graphs.

“Some of the stories that I probably wouldn’t have done if I didn’t get a good image,” she said. “If there’s a visual, it makes my job that much easier.”

Social media increases access

The panel was unanimous in their claims that social media has altered everything about the way health and medical journalists do business.

For one, social media has now changed not only the ways in which journalists receive news, it has changed what types of stories they’re now likely to cover. Traditional media’s forays into blogging have resulted in a more nimble and nuanced medium. Media’s transformation has allowed editors much more flexibility in the types of stories they’re allowed to cover.

“I find Twitter enormously helpful, both for finding story ideas and establishing relationships,” said Hobson.

There are certain PR folks I follow on Twitter,” Pettypiece added. “There are times when I’ll see a person commenting on story ideas and I realize they know what they’re talking about. It’s a good way of getting in touch with me too.”

The panel warned that while studies are usually a great springboard for a story, it doesn’t make them silver bullets. For one, they have to come from legitimate sources.

“I like studies, but I want to make sure I know all the details behind the claims,” Rajapaksa said. “If the news is presented at a meeting, of course I’m skeptical. I’d rather see news claims in a journal.”

At least one panelist cited a “big prejudice” against one common staple in the health beat: awareness months.

“It’s not my job to raise awareness, it’s my job to tell the news,” Hobson said. “Awareness is something we normally don’t cover. So, if it happens to be a good story and it happens to be in October I’ll take it.”

The panel was moderated by PCNY President Peter Himler.
‘Green jobs’ ripped as propaganda

By Kevin McCauley

The idea of “green jobs” is nothing more than a propaganda tool used by the Obama administration to “provide legitimacy to a pre-determined outcome that benefits a political ideology rather than the economy or the environment,” according to a scathing 33-page September report released by the House Committee on Oversight and Government Reform.

Cheered by Congressman Darrell Issa (R-Calif.), the committee rips the President for a green agenda that “has been driven by political favoritism and accusations of pay-to-play relationships benefiting private investors with the security of public loan guarantees,” as in the case of bankrupt solar panel producer Solyndra, which received a $535 million loan guarantee.

The report charges that the administration backed by an alliance of environmentalists and labor groups pushes green energy at the expense of traditional fossil fuels.

“By sacrificing domestic carbon-based resources upon the altar of an ill-fated green energy experiment, the President has put U.S. economic security in jeopardy and wasted billions in taxpayer money at a time when our fiscal health is in peril.”

The President’s green energy campaign has been pursued while it “simultaneously implemented a regulatory agenda that is choking American businesses and restricting access to abundant domestic natural resources which have traditionally provided cheap energy that supports economic growth.”

The report does see one beneficiary of the U.S. green agenda: China. With its near-monopoly of “rare earth minerals,” which are essential components in wind turbines, advanced batteries and solar panels, China has a competitive advantage in green technologies.

The study concludes that the administration’s push for a green energy economy “should not be touted as a jobs program: it is a program that has destroyed jobs at a time when our economy needs them the most.”

LIQUOR MARKETERS OUTLINE SOCIAL MEDIA RULES

The hard liquor industry through its trade group in September unveiled social media guidelines for responsible marketing in coordination with its European counterpart.

The Washington, D.C.-based Distilled Spirits Council of the U.S., known as DISCUS, faces a challenge with social networking and other digital media sites as its own code requires that marketing should only be placed in media where at least 71.6% of the audience is reasonably expected to be above the 21-year-old purchasing age for alcohol.

But DISCUS cites Nielsen data showing that more than 82% of Facebook’s audience is over 21 while Twitter’s drinking-age users top 86%.

Among its self-imposed guidelines are requirements for verifying users’ age — known as age-gating — before viewing sites like Facebook pages, a practice already in place for standard web pages.

The new guidelines also call for liquor brands to monitor user-generated content on their own pages and sites, urge users not to forward content to underage viewers, and calls for digital marketing communications and product promotions to be transparent.

DISCUS said companies that don’t comply will be investigated and results of those probes will be posted online.

The new guidelines went into effect Sept. 30 for members of the trade group covering social networking sites, websites, blogs, mobile communications and applications.
Juice marketers fight arsenic claims

By Greg Hazley

Apple juice producers and marketers have launched a PR defense after a syndicated TV program said last month that tests on apple juice detected high levels of arsenic.

Dr. Mehmet Oz of “The Dr. Oz Show” reported Sept. 14 that a New Jersey testing lab found elevated levels of arsenic in apple juice in several brands, including Minute Maid, Mott’s, Apple & Eve, Gerber and Juicy Juice. It suggested increased use of ingredients from China, a top arsenic exporter, could be a cause and the report sparked a flurry of stories about juice safety and spate of blog posts and online discussion, particularly among parents of children who drink apple juice.

The Food and Drug Administration issued a consumer update on Sept. 13, ahead of the show’s airing, defending the safety of apple juice. “There has been publicity recently over the amount of arsenic in the apple juice that many children drink, but the Food and Drug Administration has every confidence in the safety of apple juice.”

The food safety regulator said it has been testing for arsenic in apple and other juices for six years since foreign producers gained market share and said there is “no evidence of any public health risk.”

The Oz show said no representatives from the juice makers tested, nor anyone from the FDA, would agree to appear on the show. It posted letters from the juice makers defending their products on the show’s website.

The Juice Products Association, a trade group that is managed by New York-based PR and consulting firm Kellen and Company, called the Oz report “misleading” and “not appropriate.” Juice makers argue that Oz measured total arsenic count, which could include natural (harmless) arsenic.

The group had its toxicologist, Gail Charnley, refute the show by noting lab reports from The Dr. Oz Show indicated the laboratory did not use the FDA’s approved test method for fruit juices. “The results of tests for arsenic in apple juice that were shared by the Dr. Oz Show with the Juice Products Association should not be interpreted as fact,” she said.

But FOX commentator Dr. Manny Alvarez echoed many who voiced concerns when he said of the Oz report and industry response that “arsenic levels in apple juice — at any level — especially levels that supersede acceptable levels that have been set by FDA itself should not be tolerated.”

The Oz show, produced by Oprah Winfrey’s Harpo Studios, seemed to relish the PR response, issuing a press release promoting the show and noting the JPA and FDA criticism ahead of its airing.

“We are not saying that apple juice is contaminated or causes cancer, but we are saying that it’s in the public’s interest to adopt stricter and universal standards for arsenic levels,” Oz said in a statement.

In July, consumer advocacy groups Food & Water Watch and the Empire State Consumer Project kicked off a campaign to urge the FDA to look at apple juice contamination by heavy metals like arsenic, particularly from foreign producers. They singled out Mott’s brand apple juice at the time for showing an elevated level of arsenic.

Dr. Pepper Snapple Group, which markets the 169-year-old Mott’s brand, blasted the reports in a statement Sept. 13. “Recent media reports regarding the presence of arsenic in apple juice have been irresponsible and have needlessly alarmed parents in the name of ratings,” the company said in a dispatch titled “Get the facts about apple juice safety.”

Mott’s, which is part of the Juice Products Association, said the FDA tested its Williamson facility last month finding its products safe and operations “sound.”

Oz has not backed down from the criticism, telling ABC News that he wants to bring attention to dangers in the food supply.
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Healthcare PR and the return of “blockbuster” pharma

While global growth for pharmaceutical and biotech products is expected to exceed $1 trillion by 2015, the pace continues to decline, according to a report released by IMS Institute for Healthcare Informatics earlier this year.

A number of factors are contributing to the changing market, including branded product patent expiries expected to put more than $160 billion in revenues at risk by 2015, and the anticipated explosion of generic spending — particularly in the U.S., where market share for branded medicines is expected to decline from 70 percent in 2005 to 53 percent in 2015. Other factors include healthcare reform, greater influence/power of payors, more limited sales force models and decreasing numbers of primary care physicians.

While the challenges of generic pressures and more limited reward for the development of traditional blockbuster drug products are significant, they are being met by drug developers’ move toward orphan indications and rare disease, so called “ultra-targeted” drug therapies, and chronic disease therapies targeted to sub-segments of a disease population.

Pfizer’s Xalkori (Crizotinib) for the treatment of non small cell lung cancer (NSCLC), which received accelerated approval in August 2011, addresses only 3-5 percent of NSCLC patients with a specific genetic mutation. With approval in just four years and anticipated sales in the range of half a billion dollars in the U.S. alone, Xalkori is unexpectedly redefining the blockbuster drug model.

At the same time, the ongoing significant innovation in large scale screening technologies is making identification of narrow subpopulations that can benefit from a specific treatment a more tangible reality. The promise for developers includes reduced cost of clinical studies, market exclusivity, reduced pricing pressure, a perceived increased chance of regulatory approval and reimbursement.

Implications for communicators

Where “blockbuster” communications initiatives are largely universal/“be everywhere” approaches, tomorrow’s will be focused, targeted, localized and measureable. Broad based programs designed to reach large populations are already shifting to “one to one” approaches that focus on personalized communications and relationship building with healthcare providers, patients...
and patient groups. Sophisticated digital analytic tools are becoming central to understanding patient and physician conversations, and enable greater message personalization and stronger real-time measurement.

For targeted therapeutics, personalized communications are playing a central role in helping to build patient and physician awareness of the potential benefit of personalized therapeutic approaches and the role and limitations of genetic testing in identifying potential candidates for therapy.

In the rare disease category, patient communities are highly networked online and through patient groups. Communications programs must focus on partnership and consensus building via personal dialog, one-to-one and patient group interaction, and development of patient support programs.

Fortunately, the shift in the development landscape toward more targeted therapies and the pursuit of drugs for rare disease is converging with the widespread adoption of interactive media that provides new channels that enable more targeted, personal engagement with both physicians and patients.

Consider the numbers. The percentage of consumers who seek health information online and create new forums for communicating with one another continues to increase. A recent PricewaterhouseCoopers report found that 56 percent of U.S. consumers support the idea of remote healthcare, requiring information exchange through digital media. In another study, more than 30 percent rated their trust in health information shared in social media forums as high or very high, and about the same number said information in social media forums was likely or very likely to influence health-related behaviors.

What’s new is that physicians have also begun to utilize digital and social media to capture and exchange information — a trend that has the potential to irrevocably change how healthcare providers work and communicate with one another, how they serve patients, and how they get their information. Many healthcare providers are establishing premium service offerings outside of managed care’s pricing parameters including access to physicians 24/7 via email and online “ask a doctor” Q & A.

Perhaps signifying that the trend has gained significant momentum, the Mayo Clinic launched the Center for Social Media earlier this year to accelerate application of social media tools throughout Mayo Clinic and “spur broader and deeper engagement in social media by hospitals, medical professionals and patients.”

As physician and patient engagement moves away from impersonal broadband communications, and toward investment in highly personal relationships and partnerships among tightly knit communities via personalized digital applications, it becomes critically important to understand what will resonate, motivate, support and drive health and prescribing and adherence behaviors. A combination of target immersion, segmentation strategies, and digital analytics is required to define and deliver the right messages via the right channels and to monitor and measure the outcomes of one to one approaches to public relations communications.

Organizations that are willing to invest in understanding, shaping and deploying the power of new communications technologies to reach both consumers and physicians will more effectively influence healthy behaviors and outcomes, drive customer satisfaction, increase patient loyalty, build stronger physician relationships, and increase pharmaceutical product sales.

Virginia Amann is Senior Vice President, Porter Novelli Global Health. This article also contains contributions from Susan Hayes, Stephanie Koze, Cheryl Nigro, and John Grunstein, all members of Porter Novelli’s healthcare leadership team.
FEATURE

Educating media, patients to personalized medicine

In the last weeks of her life, biotech publicist Adriana Jenkins wrote her article “A Dying Wish” for Forbes. It was a compelling and emotional account discussing her struggles with cancer, how the personalized therapy Herceptin helped extend her life by nine years, and the need for government incentives to encourage companies to develop and commercialize more personalized medicines. She did not live to see the article published.

By Jill Dosik

According to the Personalized Medicine Coalition, personalized medicine addresses the cause of a patient’s disease or predisposition toward a disease on a molecular level by treating particular genetic mutations. Ten years ago, when the human genome was first decoded, immediate progress in this area was expected but, unfortunately, failed to materialize as quickly as hoped.

However, significant advances have been and continue to be made.

Two personalized medicine therapies that received a great deal of attention at this year’s ASCO meeting are examples of this progress. Data was presented for crizotinib, a lung cancer drug from Pfizer, and vemurafenib, a melanoma treatment from Roche/Daiichi Sankyo. These compounds are also noteworthy in that they both progressed directly from Phase 1 to Phase 3 trials through use of validated biomarkers. In each instance, applications for the therapeutics and the companion diagnostics were submitted for FDA review at the same time. Both crizotinib and vemurafenib, as well as their companion diagnostics, were approved by the FDA this summer.

More personalized drugs are in development than ever before. A survey conducted, last year, by the Tufts Center for the Study of Drug Development found that 80 percent of pharmaceutical and biotech firms are working on personalized medicine projects. Among the 21 companies interviewed, 12–50 percent of their current clinical pipelines involve personalized medicine.

As public relations professionals, there are several considerations we must keep in mind when communicating about personalized medicines, investigational or on market, whether we are speaking to physicians, patients or the media. Ensuring shared information is evidence-based and intelligible is the first step to respecting the science and the people weighing therapeutic options and advances. An understanding of the complexities related to reimbursement, therapy costs, patient confidentiality and regulatory pathways is essential. Responsibly managing expectations is paramount.

One striking instance can be found with the announcement earlier this year of Phase III results for Vertex Pharmaceutical’s pipeline cystic fibrosis therapy VX-770. The drug significantly improved lung function is this difficult to treat disease — great news and a great story. Because VX-770 is designed for a mutation carried by only 4–5 percent of CF patients, it will not help the other 95 percent. Therefore, there was a critical need to relate the data with precision and sensitivity and not give false hope to the many patients and their families who would not benefit from the drug. A review of the Vertex press release and resulting media coverage of this announcement indicates that the company did exactly that.

The pharmaceutical industry also has opportunities and obligations in terms of helping physicians better understand the science underpinning personalized medicine and how to apply that science to diagnosis and care. A recent AMA/Merck Medco study showed that 98 percent of physicians agree that patient genetic profiles may influence drug therapy but only 10 percent believe they are adequately informed about the pharmacogenomic testing.

Beyond when and how to test patients, information must also be provided on which tests are covered by insurance and the regulatory status of various diagnostics. When speaking to professionals, communicators must also go beyond traditional end-user audiences, like oncologists, to other physicians along the diagnostic pathway. For instance, pathologists and pulmonologists must be informed about the size of a tissue sample needed to identify a particular genetic mutation to optimally evaluate the cause of lung cancer.

Further, diagnostic manufacturers could potentially become a partner with pharmaceutical/biotech companies in public relations efforts as they are increasingly working together. Diagnostic companies may also be more interested in conducting education initiatives on their own than they have been in the past.

There’s also a parallel need for patient education and empowerment. Personalized medicine can be esoteric and complicated. Patients and their families are often overwhelmed both by the illness and potential treatments and clinical trial opportunities.

Materials that clearly convey the basis of various treatments and investigational agents and who they can and cannot help are essential as are spokespeople that can make the information understandable and useful.

To this end, CancerItsPersonal.com, a user-friendly site for both patients and physicians that provides education and resources about biomarkers, screening and personalized treatments was launched earlier this year by Pfizer Oncology.

Advocacy groups are also extremely effective as serving as the touchstone between pharmaceutical industry, researchers and patients and therefore can be excellent partners in personalized medicine information initiatives.

Communicators must be vigilant on updating key media — another stakeholder group still in the process of learning how to discuss and report on the promise and limitation of personalized medicine.

Personalized medicine can be a complicated pitch. Beyond sneak peeks of scientific developments on the horizon, certain angles recently have particularly resonated with top tier media, such as the positive impacts on global health; drill down on cost, availability issues and access issues; the impact of personalized medicine on baby boomers, as well as the tie-in to high-profile disease areas such as Alzheimer’s, Parkinson’s and cancer.

Physicians, patients and media must continue to be made aware of the practical, ethical, legal and social implications of personalized medicine. As communicators, our role is to ensure clear, comprehensible communications grounded in science is available to them.

Jill Dosik is President of GCI Health, and a member of the New York State Bar. ©
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Marketing automation bridges gaps between disciplines

By Brad Dodge

The line between PR and marketing communications gets blurrier every day, to the point where it’s hard to distinguish one discipline from another. Of course, a solid communications strategy demands there is no line. Every possible tactic should work in concert to deliver the best return on investment that a company makes in marketing and PR.

Isn’t sales the ultimate objective? If an agency is working to help a company build more brand awareness or a reputation as a thought leader, how do you tie those results to the corporate growth that determines whether the agency’s services are a good investment?

Today’s integrated communications agencies have a great opportunity to strengthen the connection between brand awareness and client growth through marketing automation. Marketing automation — more aptly called lead nurturing — is both a tool for increasing the efficiency of marketing initiatives and a tool for driving revenue. It’s about automating the routine and repeatable tasks associated with lead management, lead nurturing, lead scoring, and creating and maintaining a marketing lead database. Marketing automation can help companies improve their productivity as well as their collaboration with sales organizations. 95% of leads in your database are not ready to talk to a sales rep or engage in an active dialog. A marketing automation system nurtures that 95%, dramatically increasing the number of prospects that turn into leads and the number of leads that convert to sales.

If marketing automation systems are so great, why aren’t they ubiquitous in every company? Just like Salesforce.com — or even Microsoft Outlook for that matter — the systems have to be learned, fed, managed, interpreted, and used in order to be effective. And many companies believe they can handle the optimal management of these systems using internal resources. It’s hardly an effective strategy. Investing in a lead nurturing or marketing automation system is only an effective strategy if there are resources to support it.

Everyone agrees that using a marketing automation system seems like a great idea to track your leads and keep them moving down the sales pipeline. But without a solid strategy for operating the tool, the potential will be lost. A company can’t expect to get results from a lead nurturing system if the responsibility to operate it is delegated to someone whose plate is already full with other activities. Lead nurturing tools will only help an organization if a clear strategy is established and the tool is built in a way that results will manifest. It’s not a silver bullet, but for any company that puts in the time to build the system correctly and subsequently commits adequate resources to operate the system, results will be outstanding.

Lead nurturing is the process of building relationships with qualified prospects that are not yet ready to buy — or even to have a meaningful conversation. A professional lead nurturing system enables you to create consistent and meaningful communication with viable customers, automate multi-step marketing programs that build relationships with qualified prospects, trigger targeted messages to prospects based on specific behaviors, educate and pre-sell prospects with relevant and personalized communications and measure every interaction and optimize results over time.

A subset of lead nurturing is lead scoring. An effective lead scoring tool enables you to automate lead qualification processes, score leads using demographics and prospect behaviors, track online activity, improve sales follow-up and decrease scores over time based on inactivity.

Automating the lead nurturing process utilizing these tools can give any company an edge over its competitors. And the discipline fits perfectly into the entire spectrum of integrated communications strategies and tactics. Today’s optimized marketing department doesn’t just throw raw tradeshow leads or blind Web inquiries over the fence to the sales department. An effective marketing department nurtures the raw leads and delivers the lead to sales once the prospect is ready to engage in a meaningful conversation.

Perhaps your sales department is the type that does an effective job nurturing leads without an automated system. My guess is that’s not the case. Turn to marketing automation to improve your efficiency, reduce the number of missed sales, improve closing percentages, and most importantly, grow your business.

Brad Dodge is CEO of Dodge Communications in Roswell, GA.
WHAT TURNS HEALTH CARE PROVIDERS INTO TREATMENT CHAMPIONS AND PASSIVE PATIENTS INTO INFORMED ADVOCATES? WHAT SWITCH NEEDS TO FLIP FOR SOCIAL AND TRADITIONAL MEDIA TO BECOME ENGAGED IN A HEALTH CARE ISSUE? AT PORTER NOVELLI, WE ARE PASSIONATE ABOUT OUR WORK AND IT SHOWS. WE TRANSFORM MESSAGES INTO CONVERSATIONS, AND CONVERSATIONS INTO ENGAGEMENTS. THE OUTCOME? RESULTS.

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FEATURE

A few dozen reasons to dislike the health insurance industry

Research consistently shows health insurance companies ranking as the most disliked link in the healthcare chain, and the least helpful. While physicians and hospitals care about their images and work to help consumers navigate a complex healthcare landscape, health insurance companies seem the most likely to appropriate Mark Twain’s aphorism about a banker: “A banker is a fellow who lends you his umbrella when the sun is shining, but wants it back the minute it begins to rain.”

By Louis Tharp

Which of the following has a license to practice medicine? A physician? A health insurance company? A legislator?

While a legislator may also be a doctor, the obvious answer is a physician.

It’s clearly not health insurance companies. So why are they unilaterally substituting — or outright denying — medicines prescribed by your doctor? They haven’t taken the Hippocratic Oath. They haven’t graduated from medical school. And they don’t have a license to practice medicine. Yet up to 70 percent of prescriptions are switched at the pharmacy counter by health insurance companies in order to reduce their costs — not yours.

Even though they can’t practice medicine, they do practice plenty of profit generation. Decisions about which drugs to dispense are based solely on economics, and health insurance companies generally don’t mind telling you so.

Is it ethically wrong? Yes. Is it a recipe for a bad image? Yes.

A physician, physician’s assistant, or nurse practitioner are the only people educationally qualified and legally empowered to prescribe medicine. Are physicians purposely prescribing the most expensive medicine, necessitating adult supervision from a health insurance company? Maybe some are. Are the health insurance companies trying to force everyone into generics? Not necessarily, since some branded drugs are cheaper than generics when rebates are included, and many drugs do not have generic equivalents.

What we’ve discovered is that physicians try to prescribe the medicine they think will work best. It’s an art form. We also know that patients want to get better, although up to half of them aren’t compliant.

A concept called “fail first” (www.failfirsthurts.org) is at the root of the health insurance image problem. It’s the high profile cases — the ones where companies refuse to allow a dying child the only drug that can save her, thus portraying themselves as the anti-Christ — society and the media don’t care that the particular drug might cost a hundred thousand dollars a dose and only prolong her life by six months. But the health insurance companies do because they know the numbers don’t add up. Insurance companies also know that the last 60 days of a hospitalized patient’s life are the most expensive and least effective medical care in the world. But they haven’t been able to communicate their issue to their customers in a way that improves understanding, increases credibility, and shows compassion. Instead we get “death panels” rhetoric — from the companies that profit by administering end-of-life care — when the cultural discussion turns to end-of-life.

To make it all worse, health insurance companies raise rates regularly, never giving the policyholder the opportunity to personally see the economic benefit of fail first practices. The patient has to fail first on a cheaper drug before qualifying for the drug prescribed. This means lost productivity, with physical and mental illness lasting longer than it should, and emotional stress.

Then those patients read about record insurance company profits.

Needed by many, disliked by all

Say whatever you want about Medicare being “socialized” medicine, it is the most efficient, cheapest and highest-rated healthcare delivery system we have in the U.S. Patients know they are covered, doctors know when and how much they will be paid, and the non-profit, low-administrative structure keeps rates lower than any private company could manage. In fact, despite all the loud talk about socialized medicine, when you combine Medicare, Indian Health Service, Veterans benefits, Medicaid and TriCare for active duty military, the U.S. has the largest universal healthcare system in the western world. And it works.

In the private sector, as structured today, it’s all about economics and — whether the substituted drug works or not — the anger at the insurance company is intense and long-lasting.

We all read about the polls showing Congress’ poor approval rating when compared with the President and Governors. Usually, though, people say their particular Congressperson or Senator is OK. It’s the rest of them who are awful.

In surveys we’ve done asking who’s the worst and who’s the best — physician, pharmacist, nurse, insurance company — the insurance company comes out worst. Always. It’s not even close. And, unlike with Congress, respondents usually grade their own insurance company as worse than everyone else’s.

Why don’t health insurance companies seem to care what people think of them?

As a group they fought healthcare reform when the pharmaceutical companies, patient groups, physician groups and the general public were for it and made economic sacrifices to ensure it passed. As a group, health insurance companies preemptively increased rates, sometimes as much as 40 percent in states like California, before healthcare reform was even passed. As a group, they have a history of aggressive tactics to disqualify people from coverage after they’ve dutifully paid their premiums. And, as a group, they regularly override physicians’ orders and substitute drugs, including putting patients on drugs not
approved by the FDA for their illness.

Salaries, pension plans and perks for health insurance executives have hit almost investment-banker highs. They are an industry ready-made for "60 Minutes" and whistleblowers, and nearly every major network and print media have given the health insurance industry their 15 minutes of infamy.

It has become so intense, this warfare between patient and insurance company that our grassroots programs now have a segment detailing exactly how to deal with one’s insurance company, and it regularly gets the highest approval ratings during exit surveys. We also regularly map community events to Congressional and state legislative districts so elected officials hear how constituents feel about their healthcare. Several states, as a result of these community events, and other influences, have pending legislation making practices such as fail first illegal. Louisiana, Massachusetts, Nevada, Mississippi, and Vermont prohibit, to varying degrees, fail first practices by health insurance companies. A handful of other states, including California and New York, have legislation pending which would also outlaw the practice, and more introduce legislation every year. As a result, health insurance companies are fighting back to make fail first legal by introducing their own bills. You have to admit when the public turns to the legislature to fix a consumer problem with a for-profit company, the situation is bad. Very few people want to endure the pain of passing legislation.

New recommendations

The American-oriented profit and subscriber structure is wrong. Health insurance companies, as detailed by T.R. Reid in his book “The Healing of America,” have stellar reputations in countries such as Switzerland, Germany and others where the private sector administers this segment of healthcare. So it’s not about getting the private sector out of health insurance, although many would prefer that. It is more about spreading risk and limiting profit. In America, however, we prefer to sue each other over whether the Constitution says the government can force all of us into a health insurance plan. It makes you rub your eyes and say, “Whaaaat?” Why wouldn’t everyone want to pay a small sum to a health insurance company for the promise of care when you get sick and can’t pay — forcing government subsidies and lower profits? In America, it’s the latter.

We are selfish healthcare consumers, especially the young and healthy among us. If health insurance companies cannot amortize the risk of the dying child who needs the million dollar treatment against the healthy population, they will amortize it another way — on the backs of the policyholders by denying drugs, hospital stays, home healthcare and anything else that can be cut. And they will try to drop the neediest, most expensive policyholders. The health insurance industry took the easy way out during the healthcare reform debate. They had their eye on the wrong ball — profits. They didn’t pay enough attention to their natural constituency — conservative Republicans — who are now fighting the constitutional battle to keep healthy people from making contributions to the plan. (It would be interesting to see whether this constitutionality fight is a political or polemical. Are the same people objecting to

continued on page 30
Health insurance companies must actively support preventive care legislation and lead the opinion shift that honors a healthy mind and body. Instead, because the average policyholder stays with a health insurance company less than five years, there is no economic incentive to help bend the unhealthy cost curve 10 or 20 years out. Again, they have their eye on the wrong ball.

**A new way to die**

Dying is cultural, not medical. We often choose to die in a hospital. We often choose heroic measures without regard for the human cost to ourselves and our families, let alone the dollar cost. Why do we do this? Because this is what technology has promised us. Check in, hook up, vegetate, and wait for your daughter to pull the plug. Our health insurance companies need to begin the critical thinking process around dying — without “death panel” hyperbole. Just as we choose a cemetery plot or cremation, we need to become more active in assessing our quality-of-life during end-of-life. This may seem nearly impossible since we haven’t yet been able to figure out that it’s the bullies in school who need discipline and therapy, not the kids being bullied, but we have to try.

**A new identity**

We are a nation of obesity, diabetes, hypertension and a hundred other chronic diseases that come from living on the wrong side of health. Our health insurance companies need to help us identify ourselves as athletes, walkers, tai chi practitioners or any number of other healthy visualizations. We need to make hiking with our grandkids and spouses a priority, not eating more 1,500-calorie fast food dinners while watching someone else being active on TV.

Our health insurance companies, instead of focusing solely on profits and feeding us the infrequent feel-good commercial, should be leading this effort in dramatically more substantive ways.

Health insurance companies have our attention, only because they have their hand in our pocket. They also have our attention because they’ve forgotten that operating a business is an honor, not a scramble for profits. They can be the responsible force that pushes us — and we will have to be pushed — to accept a new identity as citizens who relish good health, plan to be healthy and reward ourselves with the benefits of health — family, job, and the ability to eagerly appreciate opportunities for improved quality of life, regardless of our age. Or they can be an irresponsible force that pushes us to demand another structure to fill this segment of healthcare delivery.

If they choose the right path, they get all the benefits — including profits — that accrue to a sensitive, compassionate, responsible company, and we all — not just some of us — get the best healthcare in the world.

*Louis Tharp is CEO of TGI Healthworks.*

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**The healthcare landscape** is complicated and constantly changing. With roots in technology and a deep understanding of the healthcare market, Merritt Group Health translates complex scientific or medical initiatives into mainstream dialogue. We provide communications and marketing strategy within the context of privacy and regulatory sensitivities. Our expert practitioners help navigate through industry complexities and business challenges to garner widespread visibility for the issues that matter most to our clients.

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Considerations for the corporate conscience

By James E. Lukaszewski

The notion that a PR person could effectively and credibly be an organization’s conscience is troubling. The vast majority of us have little, if any, impact or contact with top management, where all credible studies show that most significant, unfortunate, unnecessary, and unethical behaviors are initiated, allowed, ignored, encouraged, or forgiven.

For many of us, knowledge of operations is generally weak, which means that the only “bad behavior” we can spot occurs in familiar areas such as communications, human resources, and maybe security. Ethical behavior in any organization begins with the tone at the top and requires relentless modeling, management engagement, encouragement, and an environment where integrity overrides all other considerations and influences every decision.

Any would-be organizational conscience needs to identify first whether an appropriate array of attitudes, ethical systems, processes, and training are currently available or in development. The truly ethical organization has tried to maintain an environment of integrity where the culture expects everyone to move toward appropriate behaviors and decisions first, and whenever there is a choice.

The environment of integrity is the atmosphere and culture created by the top leadership of an organization that teaches, fosters, coaches, and expects an employee’s intention to do the best, most correct, or “right” thing first. It also promotes the obligation to report to appropriate authorities (in or out of the organization) when non-compliance, failure to adhere to the code of conduct, or omission, commission, or negligence occurs. Effective integrity development programs make everyone in the organization a corporate conscience. This is a powerful goal for the ethical communication leader, and the real goal for the “corporate conscience.”

One place for the communicator to start is engagement in the existing compliance, code of conduct, and integrity development processes. These are powerful operational-level responsibilities. Specialized codes of conduct can be created for special circumstances. The great challenge of achieving ethical behavior is providing employees with useful, clear, and memorable examples of the right way to do things, how to acknowledge or identify inappropriate or unethical behaviors, and safe, clear ways to report bad behavior.

Another place to begin is an examination of your organization from a current ethical behavior perspective. There are easily recognizable patterns of behavior that indicate potential ethical problems. There is another powerful pattern to consider: persistent unethical behaviors and decisions are often predicate activities to criminal behavior. Widespread, generally accepted unethical behavior almost always indicates that inappropriate behavior is present somewhere.

The communicator’s most useful role is in helping management create an environment of integrity. Employees seek to work in such an atmosphere. Specifically, such an atmosphere is required in public companies under Sarbanes-Oxley.

Truly being management’s conscience is an enormous, complicated, badly needed goal in which very few PR people happen to be engaged at the moment. If you are interested in building integrity in your organization, this broad approach is more important, more achievable, and more impactful than being the corporate conscience.

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Beehive PR is a strategic PR boutique based in Saint Paul, Minn., representing brands with operations across North America. We help our clients find strategic and creative paths from where they are to where they want to be. Our inspiration comes from listening to what key audiences need, and developing strategies that engage them when and where it matters most.

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The CLIO Healthcare Awards is an extension of The CLIO Awards, one of the world’s most recognized awards competitions for advertising, design and communications, which celebrated its 50th Anniversary in 2009. Healthcare accounts for more than one-third of the U.S. gross national product. It has become one of the most visible sectors of advertising, promotion and creative design in the last few years, particularly on TV and online. However, it is regulated differently and more stringently than traditional advertising and promotion. The CLIO Healthcare Awards will be executed using the same rigorous standards and commitment to excellence as the CLIO Awards, but levels the playing field to qualify and judge this particular and massive industry sector more fairly and appropriately.

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Cooney/Waters Group is a mid-sized firm providing the full range of public relations and public affairs services to healthcare, pharmaceutical and biotechnology enterprises in the non-profit, government, academic and industrial sectors throughout the world. Headquartered in New York, Cooney/Waters is focused exclusively on health and science across many therapeutic areas and health industries and provides all clients, regardless of size, direct involvement of a long-tenured senior team.

Ranked among the top independent health care agencies in the U.S., more than 47 communication professionals have extensive expertise in public health education, health/science communication, constituency relations/advocacy development, product launches and life cycle management, corporate reputation building and issues management. The agency serves clients on a global basis through multiple affiliate relationships forged over the past two decades.

Alembic Health Comms. (alembichemlhealth.com), a sister company of Cooney/Waters, specializes in communications programs for clients in the area of health advocacy and offers a full range of communications services to its clients, which include the National Foundation for Infectious Diseases and the National Meningitis Association. Cooney/Waters continues to focus on marketing support, branding programs and issues management for clients including Abbott Fund, The Coca-
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CooperKatz & Co. offers full-service public relations capabilities to a national client base. The firm has deep expertise supporting health providers and payers, as well as non-profits and consultants focused on health industry issues.

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Brad Dodge, CEO

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Whether your target audience is consumers, providers or payers, “one-size-fits-all” solutions in healthcare no longer work. Technology, economics and the competitive landscape change too rapidly for yesterday’s strategies and tactics. Programs must now be laser-focused, with ROI based on business metrics; not on tactical results.

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As a cutting edge shop, JFK employs the latest in digital, interactive and social media strategies in concert with traditional media channels to achieve communications objectives in an increasingly complex and ever-evolving healthcare environment.

At JFK we focus on your needs. We listen, we learn, we interact and we counsel. We seek partners, not clients. If you want yes men and order takers, we are the wrong choice.

Our extensive industry experience along with our world-class communications expertise has attracted global, blue chip organizations across a broad life sciences spectrum. In addition to traditional life sciences companies, JFK Communications works with contract research organizations, contract manufacturing organizations, health information/IT companies, hospital systems, and healthcare payers, as well as healthcare advocacy and professional organizations.

JFK’s managing partners, John F. Kouten and David Avitabile, foster a corporate culture of superior service, creative programming and measurable results. Our working environment is fast paced, supportive, creative, challenging and team-oriented.

JFK’s seasoned staff has its finger on the pulse of a dynamic healthcare universe, and we hate wasting time on yesterday’s strategies. We are engaged and passionate about our industry. We love helping our partners understand not only where we are today, we help them see what the landscape will look like next year and five years from now. We understand the new U.S. healthcare environment and how it will impact organizations here and around the world.

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**KATCHER VAUGHN & BAILEY PUBLIC RELATIONS**

401 Church St., Suite 2100
Nashville, TN 37219
615/248-8202
healthcare@kvbr.com
www.kvbprhealthcare.com
www.twitter.com/KVBPRhealth

At KVBP (Katcher Vaughn & Bailey Public Relations), we have the inside perspective on healthcare. With evolving technology, an ever-changing environment of reform and increased marketing competition, the healthcare industry faces distinctive communications challenges. Our award-winning track record includes strategically planning and implementing marketing campaigns that include media relations, patient and community relations, employee communications, grassroots advocacy campaigns and crisis planning and management. KVBP’s spectrum of experience includes programs...
for such clients as BlueCross BlueShield of Tennessee, Hospital Alliance of Tennessee, Nashville Health Care Council and Pfizer Inc., among others.

**KOVAK-LIKLY COMMUNICATIONS**

23 Hubbard Road
Wilton, CT 06897-3045
203/762-8833
Fax: 203/762-9195
www.KLpr.com
info@KLpr.com

Bruce M. Likly, Principal
Elizabeth D. Likly, Principal

Kovak-Likly Communications is a leading, independent public relations and marketing communications firm focused on the pharmaceutical, biotech and medical technology industries.

Kovak-Likly distinguishes itself from other public relations agencies, by providing marketing counsel above and beyond public relations activities.

Kovak-Likly’s industry and public relations experience enables the team to solve their clients’ most challenging business problems; making Kovak-Likly trusted advisors and part of your corporate marketing team.

Kovak-Likly has successfully formed close working relationships with a select number of healthcare clients since 1985.

Together, we will strengthen your voice in the marketplace.

**LAVOIE GROUP**

10 Derby Square
Salem, MA 01970
978/745-4200
info@lavoiegroup.com
www.lavoiegroup.com

Donna LaVoie, President & CEO
Amy Speak, VP, Public Relations
Cindy Miller, VP, Product and Marketing Communications

For ten years, LaVoie Group has been the leader in Life Science Communications, serving clients in the biotech and pharmaceutical, medical device and diagnostics, as well as platform technology sectors. We have partnered with leading life sciences brands to build their companies, attract capital, and reach corporate partners, patients, and physicians through integrated communications and outreach programs. We work globally and represent our clients to develop strategies and implementation of corporate and/or product programs. Our clients include: Aegerion Pharmaceuticals, Alphatec Spine, Invida Group, Pfizer Inc., Pfizer Animal Health, Vertex Pharmaceuticals, sanofi and Hepregen Corporation. LaVoie Group is ranked by INC. as one of the leading independent healthcare PR firms in the U.S. in 2010. Our industry awards include the coveted Impact Award for “Best Industry-Exclusive Agency,” sponsored by the League of American Communications Professionals (LACP) and the Bell Ringer award for corporate identity by the New England Publicity Club and we have been honored by the LACP as “Boutique Agency of the Year” for 3 years in a row — 2008, 2009 and 2010.

**MARINA MAHER COMMUNICATIONS (MMC) HEALTH AND WELL-BEING**

830 Third Avenue
New York, NY 10022
212/485-6800
mahercomm.com

Marina Maher, President
Diana Littman Paige, EVP/Health & Well-Being Practice Director
Megan Svensen, EVP/Development
Debra Gaynor, Chief Business Strategist
Michele Schimmel, Managing Director/Health & Well-Being
Jennifer Horowitz, Group SVP/Health & Well-Being

The unchallenged expert in marketing to women, MMC Health & Well-Being has a deep knowledge of consumers, giving us a creative edge over the traditional healthcare PR agencies. We make medicine, health and science relevant by bringing together the best of two key disciplines: expertise in consumer marketing and grounding in scientific and industry knowledge.

Our experience is across a broad variety of health and well-being products, ranging from high-science biologics and chemical compounds to innovative OTCs and personal care products. MMC educates and mobilizes influencers — from HCPs to online influencers and peer groups — to motivate women to take action.

Recent MMC successes include organizing the first summit for migraine gamers; helping a client secure a sub-analysis of a landmark study to provide data support for its emerging treatment; and using popular culture media like Access Hollywood and People.com to energize categories that media aren’t talking about, such as light bladder leakage, contraceptives and bone health. The practice, led by Diana Littman Paige, won numerous new clients in the past year, including Merck’s women’s health franchise, Pfizer Consumer Healthcare’s Caltrate and Robitussin, Fibrocyst Science’s LAVIV, and NuPath’s investigational migraine patch.

**MARX LAYNE & COMPANY**

31420 Northwestern Highway
Suite 100
Farmington Hills, MI 48334
248/855-6777, ext. 105
mlayne@marxlayne.com
www.marxlayne.com

Michael Layne, Managing Partner

Since 1987, our Healthcare group has provided communication and marketing support to pharmaceutical companies, insurance companies, healthcare facilities and medical groups by applying a strategic array of communication tools and deep experience.

Our account team includes executives with extensive healthcare marketing backgrounds. We work regularly with trade, print and broadcast journalists covering a broad range of health issues. Our experience includes work with the state’s largest hospice, a global pharmaceutical manufacturer, a statewide coalition of healthcare professionals, medical practice groups and individual physicians.

Together with our Public Affairs practice, our Healthcare group is knowledgeable about consumer concerns and public policy discussions involving senior care issues, health insurance benefits, prescription costs and importation, home care, Medicare and Medicaid strains and other high-impact subjects.

Our areas of expertise include public relations counsel, media relations, media training, reputation management, speech writing, digital marketing, social media, public affairs, employee relations, special events, branding and graphic design and adversary communications.

**MCS HEALTHCARE PUBLIC RELATIONS**

1420 State Highway 206
Bedminster, NJ 07921
908/234-9900
www.mcspr.com

Joe Boyd, CEO
Jeff Hoyak, President
Todd Forte, Executive VP
Brian Thompson, Senior VP

Creativity: As an independent public relations agency, MCS is recognized for its strategic focus, creativity and knowledge of issues affecting the healthcare industry. From developing innovative DTC awareness campaigns to helping effect change in the way medicine is practiced, MCS, over a quarter-century of operations, has gained communications experience in virtually every therapeutic category with a wide range

Continued on page 38
Healthcare Practice Director:
703/390-1500
Reston, VA 20191
Neck Cancer Alliance.
Scerene Healthcare and the Head &
Zentaris, PDR Network, Qforma,
MannKind Corporation, AEterna
Merck, Genentech, CSL Behring,
and patient advocacy organiza-
tions define every project.

Investing, professional execution and
creative conception, strategic plan-
ing, media relations and media training;
communications, issues management,
digital and creative marketing commu-
nications services to customize
creative programs for our clients and
then counsel them on best prac-
tices in communicating with audi-
cences through traditional mediums
as well as online channels where
ideas, content and opinions are
freely exchanged in collaborative
open environments.

With its comprehensive under-
standing of the market and relevant
issues, Merritt Group’s healthcare
team has worked with clients across
the healthcare spectrum. We cur-
cently support industry leaders in
medical devices, health information
management, health IT, public
health, pharmaceuticals and
biotechnology.

MCS HEALTHCARE

Continued from page 37

of clients in the medical space.
Service: Our services include Rx
and OTC product and corporate
communications, issues manage-
ment and crisis communication;
media relations and media training;
advocacy relations; business-to-
business PR, and social media
counsel. MCS also conducts pro-
grams and media campaigns in
Europe in concert with our interna-
tional partner agencies.
Results: While the needs of each
client differ, the fundamentals of
creative conception, strategic plan-
ing, professional execution and
results that return the client’s
investment define every project.

Since its founding in 1985, MCS
has worked with the world’s lead-
ing pharmaceutical, biotechnology
and medical device companies, as
well as other industry service
providers and medical professional
and patient advocacy organiza-
tions. Current clients include
Merck, Genentech, CSL Behring,
MannKind Corporation, Alterna
Zentaris, PDR Network, Qfarma,
Scerene Healthcare and the Head &
Neck Cancer Alliance.

MERRITT GROUP
11600 Sunrise Valley Dr., Ste. 320
Reston, VA 20191
703/390-1500
Healthcare Practice Director

Merritt Group is a nationally rec-
ognized marketing communications
agency with offices in Washington,
DC and San Francisco, CA and
partners worldwide. Our team is
comprised of more than 30 profes-
sionals including former journalists,
analysts, social media experts, mar-
teting & PR practitioners and
designers. Our expert staff of strate-
gists, writers and designers work
hand-in-hand with our clients’
communications and marketing teams
to ensure that all campaigns are
tightly integrated with existing busi-
ness objectives and directly support
the goals of the organization.

Industry expertise is a critical com-
ponent to a successful platform. We
do not believe in a jack-of-all-trades
practitioner model; but instead,
have built practice groups that offer
our clients Marcom expertise, along
with unparalleled domain knowl-
edge and experience.

Merritt Group’s healthcare prac-
tice includes leadership that has
been practicing in the health and life
sciences space for the past 15 years.
Our team has worked with most, if
not all of the major pharmaceutical
companies as well as emerging
biotech companies, not-for-profits,
academic institutions and advocacy
groups. This experience has provid-
ed us with deep knowledge of this
complex and highly regulated space
as well as a robust tool kit to support
our clients’ various business objec-
tives. We blend media relations,
public affairs, issues management,
digital and creative marketing commu-
nications services to customize
creative programs for our clients and
then counsel them on best prac-
tices in communicating with audi-
cences through traditional mediums
as well as online channels where
ideas, content and opinions are
freely exchanged in collaborative
open environments.

With its comprehensive under-
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issues, Merritt Group’s healthcare
team has worked with clients across
the healthcare spectrum. We cur-
cently support industry leaders in
medical devices, health information
management, health IT, public
health, pharmaceuticals and
biotechnology.
Take a fresh look at Cooney/Waters

Health Care Communications Specialists

Accomplished | Collaborative | Discerning

Contact Tim Bird, President and COO
90 Fifth Avenue, 8th Floor
New York, NY 10011
Phone: 212-886-2200
Email: business@cooneywaters.com

www.cooneywaters.com
PERITUS

Continued from page 38

the myriad of healthcare sectors need sound consultation, honest advice and a team of experts that delivers results. That is why so many healthcare companies turn to Peritus. Our expertise extends to doctors, hospitals, the pharmaceutical industry, insurers, the senior-housing industry and the skilled nursing industry. We know healthcare. We know how to win. Contact us, and we will take it from there.

PORTER NOVELLI

7 World Trade Center
250 Greenwich Street, 36th Floor
New York, NY 10007
212/601-8000
212/601-8101
www.porternovelli.com

Gary Stockman, CEO
Susan Hayes, Partner, Global Director, Health
Chris Lynch, EVP, Director of Business Development

For more than 35 years, Porter Novelli has worked on the front lines of the world’s most challenging health care issues. We develop strategies to influence, and ultimately transform, the beliefs, attitudes and behavior of our target audiences.

We work with the world’s leading pharmaceutical, life sciences and device companies, professional organizations and government health agencies. Our global, multidisciplinary team helps clients navigate the complex health care communications environment to maximize engagements, drive education, protect and promote reputation, create advocates and deliver meaningful, measurable results.

Our expertise includes advocacy mapping and engagement, blogger and influencer relations, crisis and issues management, customer relationship management, brand lifecycle management from pre-launch through post-launch, doctor-patient communication, event management, media outreach, mobile and social media, public health education and advocacy, regulatory affairs, social marketing and strategic planning and research.

RBB PUBLIC RELATIONS

355 Alhambra Circle, Suite 800
Miami, FL 33134
305/448-7450
www.rbbpr.com

Christine Barney, CEO
Lisa Ross, President
John Quinn, EVP, Healthcare

Three-time PR Agency of the Year, rbb Public Relations has earned a national reputation and top industry awards including a 2011 Silver Sabre and Avnl for spearheading a high-grossing cause-related marketing program for a global fitness company. rbb prides itself on developing marketing programs that yield substantive results.

Whether promoting advanced medical treatments for a nationally ranked academic medical center, counseling a state insurance leader through a business transformation, or engaging the public in health education campaigns, rbb combines creativity, a strategic approach and comprehensive measurement metrics to help clients achieve business goals and burnish their brands as a competitive asset.

The agency’s healthcare practice creates and executes brand-defining and sales-driven communications campaigns for a full spectrum of clients including medical products companies, higher education institutions and health and wellness companies. Services include identity branding, marketing/sales support, media and community relations, social media and crisis communications.

REVIVE

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915 Saint Vincent Avenue
Santa Barbara, CA 93101
805/617-2832
Fax: 805/617-2850
learnmore@revivpr.com
www.revivpr.com

Nashville
209 10th Avenue South, Suite 404
Nashville, TN 37203

Brandon Edwards, Founder & President
Joanne Thornton, Partner & EVP
Kris Goddard, Director & EVP
Nicole Mraz, Founder & VP
Jeff Speer, VP
Amy Murphy, VP

Revive is the 15th largest health care PR firm in the country, recognized for its insights, strategic counsel, and flawless execution predicting problems, protecting reputations, and crafting the right story for its clients. Revive represents major hospitals and health care systems, academic medical centers, physician organizations, industry associations, healthcare I.T., and health and wellness companies.

The firm was recognized as the Fastest Growing PR Agency in America in 2010 and the New Agency of the Year for 2009, having dealt with nearly every type of business challenge within the Health Services sector. Revive has designed and implemented successful communications strategies for highly complex issues such as payer/provider contract negotiations, M&A, wellness initiatives, disease management programs, engagement marketing, and clinical integration initiatives while also confronting the most challenging and interesting issues in Healthy Living.

With a specialized focus and expertise, Revive tackles the convergence of health care and wellness by working with clients who provide solutions to the issues that face health care providers, employers, and consumers alike.

RF | BINDER

950 Third Avenue, 7th Floor
New York, NY 10021
212/994-7600
Amy.Binder@rfbinder.com
www.rfbinder.com

Amy Binder, CEO

RF|Binder has extensive marketing communications experience working with clients in the ethical pharmaceutical and OTC product arenas, as well as with patient advocacy groups and medical associations.

Whether our clients are multi-national pharmaceutical companies, biotech startups, public health agencies or non-profit healthcare associations, we provide senior level involvement, research-based creative strategies and a commitment to results. We recognize that successful organizations demand more competitive communications approaches. These new approaches must work to gain the attention of an increasingly fragmented marketplace in order to deliver a wide range of medically sophisticated messages, ensuring that our clients stay ahead of the competition.

We apply this approach to all aspects of healthcare marketing, including product launches and brand extensions; public education campaigns; brand positioning and reputation management; establishing/enhancing thought leadership; building grassroots support for products and policies; cultivating third-party relationships with advocacy groups and institutions; crisis management; and investor relations.

ROSICA PUBLIC RELATIONS

95 Route 17 South, #202
Paramus, NJ 07652
866/843-5600
Fax: 201/843-5915
pr@rosica.com
www.rosica.com
www.thearchitectbrand.com

Chris Rosica, CEO

Since 1980, Rosica Public Relations, a national firm, has a well-earned reputation for delivering results for healthcare

The November issue of O’Dwyer’s will profile PR firms that specialize in hi-tech and technology. If you would like your firm to be listed, contact Editor Jon Gingerich at 646/843-2080 or jon@odwyerpr.com.
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PRESS KITS
Press Kit & Product Assembly
CD/DVD Duplication & Mailings
Press Release Distribution

DATABASE
Computer Services
NCOA
Personalization / Variable Data

TARGETER®
Broadcast Faxing
E-mail Targeting
Media Contact System

520 8th Avenue, 14th Floor  New York, New York  10018
T: 212.279.4567  •  F: 212.279.4591  •  www.log-on.org
clients. Rosica combines the resources and depth of talent of a large agency with the personalized attention of a boutique firm. The Rosica senior-level team has earned the trust of clients and colleagues at global pharmaceutical, healthcare technology, life sciences, animal health, OTC, medical device, B2B and consumer health product companies.

Rosica has strong credentials in areas important to healthcare: product launches; public affairs, including disease awareness, patient advocacy, policy support and community relations; media relations with traditional and online; corporate communications including crisis and issues management; social responsibility programs and cause marketing.

The team’s clients over the years have included decade-long relationships with global pharma, medical technology, animal health and life sciences companies; a national healthcare industry association; and makers of products important to family health, hygiene and infection prevention.

RUDER FINN
301 East 57th Street
New York, NY 10022
212/593-6400
www.ruderfinn.com

Susan Goldstein, Managing Director, Global Health Care Practice

As one of the recognized industry leaders in providing global, national and regional communications services to pharmaceutical and biopharmaceutical corporations, medical device companies, trade associations and non-profit organizations in the healthcare sector, Ruder Finn has enjoyed double-digit growth over the past 4 years. Clients include Novartis, Merck, Bristol-Myers Squibb, AstraZeneca, Pfizer, Abbott Laboratories, Shire, Forest Laboratories, Council for Responsible Nutrition, American Urological Association Foundation, Michael J. Fox Foundation, the Intercultural Cancer Council; and New York Blood Center.

Along with extensive expertise in launching, promoting and branding first-in-class drugs and lifesaving treatments, Ruder Finn specializes in addressing lifestyle issues and regularly works with associations and clients on partnerships to establish innovative platforms and break new ground in communicating branded and non-branded information. Our media approach and strategies consistently produce front page, high-visibility coverage, and journalists rely on us for accurate and transparent news and information. Ruder Finn also has a demonstrated track record of conducting high-impact wellness campaigns addressing OTC medicines, skincare products, food and nutrition issues, and products/services to promote exercise and weight loss.

Ruder Finn maintains offices in Chicago, Los Angeles, New York, San Francisco, Washington, London, Paris, and Jerusalem. Asia Pacific offices include Sydney, Beijing, Guangzhou, Hong Kong, Shanghai and Singapore. The agency also works with leading independent affiliates in major markets throughout the U.S., Europe and Latin America. Ruder Finn is ranked No. 1 in New York in revenues and staff size by the PR trade newsletter, O’Dwyer’s, the agency serves the global and local communications needs of more than 250 corporations and nonprofit organizations.

At Spectrum, we specialize in health and science communications because we are genuinely interested in the scientific process and how it can improve lives. Spectrum is an independent, full-service communications counseling firm which has made health and science our specialty since 1996. From our experiences working at mixed-interest public relations firms, we appreciate the need to focus on life science and health, and make it our number one priority.

Our people know science. We are expert in interpreting complex discoveries, products and missions and relaying your messages in ways that resonate with each audience we address to benefit our clients. We dig deep to find the most meaningful, strategically valuable elements within our clients’ information assets. We intrinsically know the salient points to emphasize to each audience.

We pride ourselves on taking a progressive and forward-thinking approach to our strategic media and public relations, public affairs, advocacy, and digital communications campaigns, while never losing sight of what’s most important to our clients, including P&G, Alnylam Pharmaceuticals, Kennedy Krieger Institute, Novo Nordisk, Roche Diagnostics and the Vascular Disease Foundation. Spectrum is hard-wired to leading health and science PR partner firms around the world through GLOBALHealthPR. We understand the many common issues facing our clients who operate internationally, and we help bridge the distance by crafting cohesive but targeted messages to their stakeholders worldwide.

Because we don’t struggle with layers of administrative teams that you might find at giant, mixed-interest agencies, we quickly respond to our clients’ needs and build lasting relationships that allow us to nimbly move with you toward success, despite whatever challenges lie ahead. Our small PR firms talk about their health “practices.” The science of health isn’t a practice at Spectrum — it’s where health, science and communications meet.
Leading the Travel Industry by Providing Professional Travel Services Since 1972

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• Government Travel Contractors
• Over 200 Offices Worldwide
• Competitive Online Booking
• One-on-One Travel Consultation
• Leisure Travel Experts

Locations:
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- Europe
- Asia

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World Headquarters • 3102 Omega Office Park • Fairfax, VA 22031 • 703-359-0200
stages. They are applicable to satellite, blog-internet, and conventional media.

TGI Healthworks’ Zurich office handles conventional PR-focused grassroots events in Western Europe and former East Bloc countries. South America and Middle East assignments are managed from New York.

TGI Healthworks is the natural evolution from traditional healthcare PR and national television and magazine advertising. We provide a structured, collaborative, turn-key relationship that brings hard-number ROI discipline to clients that have the infrastructure and mission to accept a dominant market position by way of patient, physician, caregiver, elected official and advocacy group focus.

Prior to 1999, TGI management ran the successful Clay Marketing & Public Relations PR agency which was created in 1984 and focused on technology and maritime issues with offices in New York and London.

Tonic Life Communications

Global Headquarters:
22 Chapter Street
London, SW1P 4NP
+44(0) 20 7798 8800
www.toniclc.com

North America Headquarters:
One South Broad St., 12th Floor

WCG’s seasoned professionals specialize in branding, design, digital, interactive, social and traditional marketing, location-based marketing, corporate PR, product PR, media, investor and advocacy relations, clinical trial recruitment and grassroots direct-to-patient communications campaigns.

The company has earned the distinction of Digital Agency of the Year from the Holmes Report, was ranked #6 of top PR firms and #3 of top healthcare PR firms by O’Dwyer’s, and was ranked #7 on PRWeek’s list of Top Independent PR Firms.

For more information, please visit www.wgcworld.com

WEBER SHANDWICK

919 Third Avenue
New York, NY 10022
212/445-8000
www.webershandwick.com

Laura Schoen, President, Global Healthcare Practice

At a time when the healthcare industry landscape is changing almost daily, Weber Shandwick’s health practice around the world is ready to serve clients across the full range of health sectors. Our team of seasoned health strategists offers expertise in biotechnology, pharmaceuticals, not-for-profit organizations, consumer health, medical devices, insurance and health maintenance, health systems, hospitals, and professional organizations.

Key offerings and services of our Healthcare Practice include license approval/expansion of indication, market seeding and development, new product launches, sustained awareness programs, disease awareness and prevention, crisis management, advocacy group relations, health policy initiatives, scientific communications, medical education, promotion of quality initiatives and social media covering virtually all therapeutic areas from arthritis to oncology.

Additionally, in a heavily regulated industry such as healthcare, having experts who understand the public policy, public health, and regulatory issues affecting the industry is invaluable. We provide strategic, full-service public relations and marketing communications services.

Weber Shandwick’s unique Scientific Communications Group (22 specialists including 17 full-time PhDs) have become our “GPS System” helping our team and our clients to stay grounded on scientific data and support each claim with the strongest evidence based on the body of studies related to that drug or condition.

Clients include Abbott, American Academy of Surgeons, Celgene, CSL Biotherapies, Genentech, Genzyme, Gilead, Lilly, Merck, Pfizer, and sanofi-aventis.

Weber Shandwick is the nation’s first and only healthcare communications agency to be fully certified for promotional regulatory compliance in public relations by the Center for Communication Compliance (CCC).

YALE SCHOOL OF MANAGEMENT

MBA for Executives:
Leadership in Healthcare
135 Prospect Street
New Haven, CT 06520
Mba-e.admissions@yale.edu
www.mba.yale.edu/mba-e

The Leadership in Healthcare program is positioned to educate healthcare professionals to respond to healthcare’s increasing demand for sophisticated management thinking. It combines elements of Yale School of Management’s integrated MBA curriculum with an in-depth exploration of the human, economic, political and technological issues unique to the healthcare industry and draws teaching resources from across Yale’s academic departments and from the Schools of Medicine and Public Health.

The program’s duration is 22-months and the Friday-Saturday twice-a-month class schedule allows students to receive a rigorous professional education without interrupting their careers. By design, each class cohort draws from across the healthcare industry e.g. pharmacy, biotech, insurance, healthcare delivery, to provide a broad range of experiences and exposure for students to widely divergent perspectives to be able to debate and appreciate the complexity of the industry. At the end of the program, students graduate with their MBA and gain new insights into how to solve the hard problems that matter in healthcare.
# O’Dwyer’s Rankings

## Top Healthcare & Medical PR Firms

<table>
<thead>
<tr>
<th>Rank</th>
<th>Firm Name</th>
<th>City</th>
<th>Revenue</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Edelman</td>
<td>New York</td>
<td>$113,202,498</td>
</tr>
<tr>
<td>2</td>
<td>Ruder Finn</td>
<td>New York</td>
<td>38,000,000</td>
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<tr>
<td>3</td>
<td>WCG</td>
<td>San Francisco</td>
<td>35,700,000</td>
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<tr>
<td>4</td>
<td>APCO Worldwide</td>
<td>Wash., D.C.</td>
<td>22,680,000</td>
</tr>
<tr>
<td>5</td>
<td>Cooney/Waters Group</td>
<td>New York</td>
<td>14,088,673</td>
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<tr>
<td>6</td>
<td>Schwartz Comms.</td>
<td>Waltham, MA</td>
<td>10,336,424</td>
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OPINION

Where to speak?

By Fraser Seitel

If you’re Barack Obama or Sarah Palin or Dominique Strauss-Kahn or Charlie Sheen, you probably have no trouble finding a speaking forum that might earn you publicity.

But for the rest of us — including, even though he won’t admit it, your CEO — locating a speaking gig that actually pays off in positive publicity (Forget money!) is no easy task.

In the first place, most of the time, alas, CEOs don’t say much that translates into newsworthiness. Second, it’s tough to convince today’s lemming-like journalists that CEO speeches are worth covering. (I mean, if they’re not on television, how important can they be???) And third, what speaking platforms are really worth covering?

While we can’t provide your CEO with nourishing things to say (unless you pay us!), and we can’t educate reporters that some speeches might actually be meaningful — we can point to the nation’s most prestigious speaking venues.

These are the forums around the nation that are invitation only, attract top corporate and political speakers, and are frequently the subject of media coverage. Most have been around for many years, have thousands of members, and sponsor weekly or even bi-weekly speaking engagements.

So if you’ve got an executive with something to say, you might consider soliciting interest from these superior venues (listed in alphabetical order) for organization speeches.

City Club of Cleveland

This “citadel of free speech,” has been holding weekly forums for 100 years. As with most other major speaking forums, the City Club sponsors its own radio broadcast of its speeches on a number of stations.

City Club of Cleveland has entertained most of the major speakers of the 20th and 21st centuries, from Jimmy Carter and George Bush to Dick Cheney and Bishop Desmond Tutu.

In a typically- eclectic week for the Cleveland staple, City Club members heard from the chairman of the National Endowment for the Arts, the inventor of the hydride battery, and the CEO of the Cleveland School District.

Commonwealth Club of California

Founded in 1903, the Commonwealth Club of California is the nation’s oldest and largest public affairs forum. The Club sponsors weekly speeches in its San Francisco and San Jose locations.

Even though it’s located in the cradle of liberal thinking, the Commonwealth Club is decidedly “nondenominational,” entertaining speeches from everyone from Nancy Pelosi and Alec Baldwin to Christopher Hitchens and the president of Kaiser Permanente healthcare.

Martin Luther King, Jr., Ronald Reagan, Bill Clinton and Bill Gates have all given landmark speeches at the Commonwealth. And it is a willing venue for corporate CEOs.

Detroit Economic Club

The nation’s premier business-oriented speaking forum, the Detroit Economic Club was primarily associated with airing the prevailing wisdom of the auto industry. In recent years, where “prevailing wisdom” in the auto industry was difficult to identify, the Detroit venue has increasingly aired the views of other industry CEOs.

Upcoming speakers include the CEOs of Union Pacific Corporation, UPS, Amway, NYSE Euronext, Huntington Bank, and Goodwill Industries. In November, the Detroit Economic Club will even hear from the Chairman and CEO of a little, local firm, General Motors.

Economic Club of New York

New York City’s most influential speaking forum, the Economic Club of New York observes a more irregular schedule than its fellow speaking forums. In the past six months, it has scheduled only two events, one a speech by former Secretary of State George Schulz, the other a speech by Speaker of the House John Boehner.

The forum’s selectivity and limited schedule add to its prominence as a coveted venue. Foreign leaders, from Winston Churchill to Mikhail Gorbachev to Margaret Thatcher all chose the Economic Club of New York to make major U.S. pronouncements.

National Press Club

The National Press Club is a Washington, D.C. private club for journalists and communications professionals. Since the National Press Club is nestled in the heart of the nation’s Capitol and is home to reporters, the speakers who appear at its 75 annual lunches often receive publicity.

Accordingly, politicians dominate the speaking schedule, but so do all variety of authors, corporate executives, sports stars and celebrity spokespeople. In recent months, the National Press Club has hosted speeches by the Haitian ambassador, the chairman of the Federal Reserve Board, Venus Williams, and will.i.am.

Town Hall

Another legendary forum, Town Hall is perhaps the only serious speaking venue in Los Angeles (maybe even the only serious thing in Los Angeles!).

Its unique location enables Town Hall to attract speakers that other business-oriented forums do not. Civil rights attorneys, police chiefs, mayors, environmental experts, and even public relations professionals appear as speakers.

Other venues in Boston, Houston, Dallas, Chicago and elsewhere offer organizational speakers similar opportunities to make news. Now all you need is a speaker with something to say.

Media Briefs

AL JAZEERA CHIEF RESIGNS

Wadh Khanfar, who has led Al Jazeera since 2003, has resigned his post as head of the Arab TV network that is viewed in more than 25 nations.

The decision follows a WikiLeaks disclosure that Khanfar met with a U.S. intelligence officer to discuss what the American government viewed as disturbing content, according to a report by Yahoo’s Dylan Stableford.

The U.S. diplomatic cable reports that Khanfar agreed to remove the offending content.

In his “Dear Colleagues” memo, Khanfar makes no mention of the WikiLeaks disclosure, opting instead for “I have decided to move on.”

He takes credit for establishing Al Jazeera as a “global media leader,” and notes inroads made in the U.S. despite political opposition.

Khanfar notes that “authoritarian regimes were terrified at the birth of this new institution and they quickly went on the offensive from trying to discredit our reportage and staff through disinformation to lodging official protests with the Qatari government.

“When this did not stop our reporting, they started harassing our correspondents, detaining our staff and closing our offices. The only way they could stop us was by jamming our satellite signal. Yet we remained steadfast in our editorial policy — in fact, each attempt to silence us further emboldened us and increased our resolve,” he wrote.

Khanfar has been replaced by Sheik Ahmed bin Jassim bin Mohammed Al Thani, who is part of the royal family of Qatar.
Single-payer healthcare: better care, lower cost

By Josh Starcher

Healthcare has already been proclaimed the central issue of the 2012 Presidential election, just like it was hailed the central issue of Obama’s presidency. It was also a central issue during the 2010 election, and the 2008 campaign. So why don’t we ever hear the end of it? Our leaders still have not solved the problem with our nation’s healthcare crisis. Even with the passage of Obama’s Affordable Care Act, there will still be millions of Americans underinsured and without insurance.

America’s healthcare debate showed there are only two ways we’re willing to go: expand the for-profit health insurance industry by mandating everyone buy insurance, with its over-priced premiums, co-pays, and deductibles; or expand Medicare for all, providing universal healthcare through a single-payer system that lowers costs.

In a for-profit model you’re essentially paying for healthcare, as well as CEOs’ rising salaries, massive administrative costs for denial-of-claims departments, and those DTC advertisements we all love so much.

In the non-profit single-payer healthcare model individuals and businesses pay less in taxes than they’re currently paying in co-pays, premiums and deductibles. The administrative costs are also less, because medical records and “billing” would be on a National Healthcare Card. With a single-payer healthcare system everyone has a better healthcare plan — and access to it — than most anyone could afford now.

**Lessons in America’s healthcare debate**

Poll after poll shows the majority of doctors, nurses and consumers support expanding Medicare for all. During the “Healthcare Debate” a 2009 CBS/NYT poll reported that 99% of Americans agreed that the government should provide national health insurance.

Single-payer healthcare was also the deciding factor in Democrats winning the 2008 election and losing it in 2010. In ’08, many thought Obama would make demands for a system that covered everyone. Indeed, during the campaign a video emerged from 2003 where then-State Senator Obama proclaimed to the Illinois AFL/CIO: “I happen to be a proponent of a single-payer universal health care program.” To leave out any confusion, Obama followed that with the movement’s own mantra “everybody in, nobody out.” Many hoped that was a signal of change to come.

Sure, there was change, but not the kind most were expecting. Soon after taking office, he then said this: “If I were designing a system from scratch, then I’d probably set up a single-payer system … Medicare would be an example of a single-payer system, if everybody was in Medicare. But the problem is we’re not starting from scratch. We’ve got a system in which most people have become accustomed to getting their health insurance through their employer.”

Obama’s explanation simply doesn’t stick. Not only is Medicare a part of the system, expanding Medicare for all would have more people paying into it as Baby Boomer after Baby Boomer turns 65. Moreover, employer-based health insurance is one of the worst aspects of private insurance. In-doctor networks cause people to become trapped in their jobs. Doctor/patient relationships are also immediately destroyed when insurance plans change.

Why are Democrats and Republicans not making the right choice between healthcare and health insurance? It’s because they’re getting paid way too much to support the problem and not the solution.

According to the Center for Responsive Politics “about $3.16 million in contributions to candidates and committees during the 2010 election cycle” (and nearly $30 million during the 2008 cycle) came from the pharmaceutical and health industry. As Senate Finance Committee Chair Max Baucus said in 2009: “single-payer is off the table.” Apparently, the insurance and pharmaceutical giants paid for the table.

The Democrats’ base lost all hope, and by 2010 the Democrats lost their majority in Congress, essentially because they didn’t stand up for real reform. Americans don’t tolerate half measures and compromise when it comes to healthcare.

**Real change starts with a single-payer**

A single-payer, universal healthcare system can be set up so that it’s publicly funded yet privately delivered, particularly through the example of Medicare. No matter how many Tea Party candidates rant about “Obamacare,” or universal healthcare being “socialism,” doctors and nurses will not be government employees in a single-payer system.

For those who say, “I don’t want the government rationing care!” Right now, the insurance industry is profiting from denying them care they’re paying for. A single-payer system will give you more freedom of choice: your choice of doctor, the ability to afford the medicine you need, and access to more care. This means no co-pays, no premiums, no deductibles, no out-of-pocket costs and no medical bankruptcies.

For those who are concerned about the “publicly funded” part, I have one question: do we really want to mandate or even continue to implement a health insurance system where we pay such high premiums, co-pays, and deductibles that it leaves millions of people under-insured, or without healthcare altogether?

**States lead the conversation**

Candidates can win elections on a single-payer, universal healthcare platform.

California passed single-payer healthcare at the state level twice, but it was vetoed by then-Governor Schwarzenegger in ’06 and ’08. Vermont passed a single-payer healthcare bill this year, signed by Governor Peter Shumlin, who recognized local organizing efforts by the Vermont Worker’s Center. Vermont’s success, still in progress, appears to set the standard.

In a hotly contested debate this year, Rep. Cathy Hochul (D, NY) stood up in support for Medicare and won in a special election against the Republican challenger Jane Corwin, who supported Medicare cuts. This election, as mentioned by the New York Times, was in “one of New York’s most conservative districts.”

One fact remains: the insurance and pharmaceutical industry can pay off national candidates, but they can’t pay off millions of Americans suffering through medical bankruptcy or living with the burden of having no healthcare at all.

Passing single-payer universal healthcare bills at the state level would far exceed the ACA’s best qualities, but it will take standing up for single-payer and good ‘ole grassroots organizing to get it done. This localized approach to organizing only makes the national movement stronger.

There are now groups in 23 states working on organizing around single-payer bills at the state level. If we can learn anything from the previous election cycles, and can understand the impact of state bills on national policies, it’s this: healthcare remains a central issue, and a single-payer plan is a winner.
Apple stands alone in strategic PR savvy

By Richard Nicolazzo

Phone. iPad. iPod. iMac. Simple product names that have come to define the best technology company on the planet and embody the spirit of Steven P. Jobs, a man whose brilliant vision and personal touch with consumers has made him a living legend.

Most of the plaudits about Jobs focus on Apple — the value of the company’s stock, the insanely successful products, the constant innovation, the billions of dollars of cash in the bank, and the company’s ability to figure out where consumer markets are headed. I believe the organization also stands alone in one other critical category: strategic communications.

In my view, never in the history of American business has such a pivotal CEO faced a life-threatening illness that has been so linked to company valuation. For what seems like an eternity, Apple has been Steve Jobs, and Steve Jobs has been Apple.

On Wednesday, August 24, 2011, all that changed when Jobs told Apple’s board of directors he was stepping down as chief executive. Using one of the oldest forms of communications in today’s universe of tools, he sent a straightforward letter to the board with no news media interviews granted. This is controlled strategic communications at its best.

The dispatch is carried universally with key messages imbedded throughout the text.

The actual 143 words in Jobs’ letter are worth noting:

“I have always said that if there ever came a day when I could no longer meet my duties and expectations as Apple’s CEO, I would be the first to let you know. Unfortunately, that day has come. I hereby resign as CEO of Apple. I would like to serve, if the Board sees fit, as Chairman of the Board, director and Apple employee.

“As far as my successor goes, I strongly recommend that we execute our succession plan and name Tim Cook as CEO of Apple. I believe Apple’s brightest and most innovative days are ahead of it. And I look forward to watching and contributing to its success in a new role.

“I have made some of the best friends in my life at Apple, and I thank you all for the many years of being able to work alongside you.”

Jobs’ style of tightly-managed communications is part of a pattern that has been criticized at times, but is still effective in protecting his privacy and not creating a media circus surrounding his health.

Many will recall his first major announcement in early 2009, when he said his dramatic weight loss was caused by a hormone imbalance. Just a week later, he announced a medical leave of absence for several months.

In June of that year, a Tennessee hospital confirmed that Jobs had received a liver transplant. Once again, these communications were all written statements, with no interviews either from Jobs or the company.

This pattern of communications continued in January of 2011, when Apple announced Jobs was taking a medical leave of absence … this time not specifying a reason or how long he would be away.

Questions were raised about the severity of Jobs’ health issues and its potential impact on the company’s stock, product development and business operations, but the company did not miss a beat.

Some may have been frustrated with the lack of specificity and transparency, but there were no Apple missteps in the process.

Apple and Jobs also deserve praise for the way the transition to a new CEO has been handled. John Dvorak, noted tech columnist for MarketWatch, likely has it right: Lots of companies in Silicon Valley would love to hire Tim Cook.

Given that Jobs is considered to be critically ill, handing over the title to Cook had to be done sooner rather than later.

If something happened to Jobs while Cook was “acting CEO,” the job may have been up for grabs. This approach is crisp, clean, and clear-cut. Cook is the new CEO and Jobs has the new title of “Chairman.”

Keeping it simple

Internally, Apple, which has more than 46,000 employees, also kept it simple. In an email to all employees, Cook’s 225-word message was a blend of cheerleading and a tribute to Jobs. The entire email is instructive in its carefully crafted composition:

“I am looking forward to the amazing opportunity of serving as CEO of the most innovative company in the world. Joining Apple was the best decision I’ve ever made and it’s been the privilege of a lifetime to work for Apple and Steve for over 13 years. I share Steve’s optimism for Apple’s bright future.

“Steve has been an incredible leader and mentor to me, as well as to the entire executive team and our amazing employees. We are really looking forward to Steve’s ongoing guidance and inspiration as our chairman. I want you to be confident that Apple is not going to change. I cherish and celebrate Apple’s unique principles and values. Steve built a company and culture that is unlike any other in the world and we are going to stay true to that — it is in our DNA.

“We are going to continue to make the best products in the world that delight our customers and make our employees incredibly proud of what they do. I love Apple and I am looking forward to diving into my new role. All of the incredible support from the board, the executive team and many of you has been inspiring. I am confident our best years lie ahead of us and that together we will continue to make Apple the magical place that it is.”

The orchestration of Jobs’ announcement is a perfect example of how to execute crisis management and general strategic communications by:

• Controlling the message.
• Ensuring accurate and timely material news to all audiences simultaneously.
• Maintaining brand, management, and corporate credibility.
• Minimizing any damage to reputa-
When did trade become a dirty word?

By Joseph J. Honick

If “trade” is not a dirty word in this administration, why on earth is it not accommodated with the investment in marketing PR that spent in the billions to sell two wars ... at least only two wars we know about so far?

I have searched in vain to find even a tiny fraction of similar investment to help the U.S. Department of Commerce to promote specific trade opportunities so our people could compete with other nations for massive opportunities emerging especially in Asia.

The reality is there is no similar PR effort to promote trade except what is done by the Commerce staff themselves in the International Trade Administration and some other miscellaneous departments charged with promoting American business abroad.

The fundamental questions are fairly simple:

1. Why are there no White House-backed outside PR and marketing RFP’s intended to push opportunities for American businesses in the same manner that have resulted in tens of billions for defense industries?

2. Why has not one single potential presidential candidate from the GOP even bothered to bring the subject up in the current political tours that fail as well to discuss the wars we cannot either win or simply negotiate to any other conclusion?

These are just two of the basic questions no one from Congress or the political circus tour are asking. Frankly, one has to wonder why the pros in the PR profession fail to promote the point.

It is of course no secret that many American small and medium sized businesses are suffering in the current economic situation.

That suffering has resulted in massive unemployment that may well result in uprisings we have witnessed elsewhere in the world. Yet those on the campaign trails act as if the subject is not worth their time.

Mostly the oratory of the GOP/Tea Party aspirants is aimed at destroying the present White House resident rather than reviewing the senseless losses, financially and in human lives, we are enduring in the wars mentioned earlier and essential parts of our daily lives.

As for the president himself, he is also spending most of his time talking about the important subject of jobs while failing to present a means to altering that particular problem.

But he has hardly addressed the wars that must occupy the lives of the tens of thousands of families whose sons and daughters are out there in the battlefields while the pockets of defense industries are filled with seemingly never ending contracts reported every day.

Well, one political leader has indeed weighed in on the subject. That person is Utah Republican United States Senator Orrin Hatch.

On August 24, Hatch heatedly blasted President Obama’s proposal to incorporate the Office of the U.S. Trade Representative into a larger trade agency. In a letter to the president, the Senator wrote:

“Mr. President, the solution to America’s trade competitiveness does not lie in creating a new ‘Department of Jobs’ or a new ‘Department of Competitiveness’ ... It lies in fighting to aggressively open foreign markets to U.S. exports.”

Hatch also demanded that he be briefed on such far-reaching proposals and condemned what he described as the president’s providing more information to media than to the Congress.

Earlier this year, the Obama administration announced that trade agencies including the Department of Commerce and the Office of the U.S. Trade Representative would be the “first fruits” of a wider federal reorganization effort.

However, despite such assertions, the International Trade Administration budget for operations and staff has been cut, and there is not one penny for the kind of private PR effort the Department of Defense.

The Utah Republican is also involved in what could be a tough fight to keep his senior seat in the Senate and is hardly likely to let up on his demands for more administration transparency on this sensitive area, nor should he.
OPINION

PRSA ethics chair makes dubious debut

By Jack O’Dwyer

Buffalo State PR Prof. Deborah Silverman made her debut last month (“PRSA Ethics Month”) as ethics chair in two dubious ways — providing a mild comment to the New York Times after Ketchum was nailed trying to trick food writers, and giving an exclusive first column to Mediabistro’s PR Newser when this should have gone to the entire PR trade press.

Not only did she appear to excuse Ketchum in the NYT by saying “the social media realm (including bloggers) is new territory for PR,” but she added that Ketchum has an “excellent reputation for high ethical standards.”

It’s hard for us to believe she forgot the dustup that engulfed the industry for months from the beginning of 2005 after USA Today outed a Ketchum/Dept. of Education contract that included a $240K payment to media figure Armstrong Williams to promote “No Child Left Behind.”

Silverman, who described herself as a “PR professor of ethics” in the PR Newser post, replaced Tom Eppes of Charleston, a solo practitioner responsible to no one but himself, who now is busy working on a doctorate at the University of North Carolina.

Silverman, however, who did not return phone calls or e-mails, is with an institution of higher learning, Buffalo State College, a 12,000-student member of the state college system. It is not to be confused with the University of Buffalo with 29,000 students, the largest of the 64 New York state colleges.

Teachers and scientists do not turn their backs on information but seek every last scrap of it with zeal. They prize the historical record of anything and listen to all voices. Facts and knowledge are revered, not feared.

Ethics head quickly resigned

The predecessor to Eppes, Prof. Gail Baker of the University of Nebraska, lasted about four hours after we informed Chancellor John Christensen and others of ethical abuses at the Society.

We included documentation of the sale of authors’ articles by PRS without their permission, the undemocratic nature of PRS that bars 80%+ of members from running for office (but doesn’t tell this to prospective members), and Baker’s refusal to answer our phone calls or e-mails.

The e-mail went out at 11:55 a.m. on March 20, 2008 and at 3:49 p.m. we received a one-line e-mail from PRS staffer Joe DeRupo saying “Gail Baker is not the chair of the EB.” She had been listed that way on the PRS website earlier in the day.

This editorial is an open letter to Silverman as well as BSC president Aaron Podolefsky, chief of staff Bonita Durand, PR director Jerod Dahlgren, BSC newspaper editor Julia Merulla and others.

Abusive practices listed

Below are abuses in approximate order of importance:

1. Failure to warn prospective members they won’t be eligible for national Society office until they become Accredited. Non-APRs can’t serve on the Ethics Board nor hold office in some chapters.

2. Providing late and substandard financial reports. IRS Form 990 was withheld from the 2009-10 Assemblies. The 2010 return is not yet available. Booking dues as cash violates FASB Section 958-605-21-1.

   The Society claims it’s “acceptable.” It should show the balance sheet both ways at a minimum. The major professional groups (ABA, AMA, AICPA, etc.) all defer large amounts of dues. Also, the Society frequently refers to “best practices” for PR pros and never to “acceptable practices.”

   “Not-for-Profit Budgeting & Financial Management,” by CPA Edward McMillan, says a “common, major accounting error” of associations is “failing to use the deferral method for dues income” since dues represent “an entire year’s worth of membership.” Booking dues as cash results in financial statements that are “overstated and misleading.” he writes.

PRS attacks freedom of press

3. Blocking press coverage of the Assembly by forbidding, since 2010, any photographs or recording of the Assembly by reporters.

   Irrationally, the Society allowed me to cover the Assembly but refused to give me “credentials” to the conference itself. The Society now won’t give me “credentials” to either for 2011, sending me 23 pages of complaints about my coverage but refusing to face me in person.

   Freedom of the press is a right granted by the First Amendment to the Constitution and in America an accused person has the right to face his or her accusers.

4. Withholding transcripts of the Assembly since 2005 and refusal to provide transcripts of teleconferences. These are like the “slow-motion” replays that are common in sports journalism that give fans needed details.

5. Blocking PR reporters from accessing the audit or quarterly reports. They are in the members’ area and reporters are not allowed to join the Society. No reason is given for this. Reporters are members of PR groups including IABC and IPRA.

6. Professing “commitment” to Sarbanes-Oxley but failing to have outsiders on the national board and failure to have an audit chair on the board who is a financial expert.

Leaders don’t face members in person

7. Refusal of leaders including chair Rosanna Fiske and COO Bill Murray to regularly face members in person. Fiske, while spearheading a drive to increase dues by $30 to $255, has only appeared two chapters, Miami and Atlanta, according to records. Murray has not addressed the New York chapter in 4.5 years. No in-person, face-to-face discussions of the dues hike are planned except at the Assembly.

8. Refusal to have a year-round list of the 270 or so Assembly delegates. They have until Aug. 15 to post their names. Also lacking is a transcript of what they say and a delegate-by-delegate record of how they vote. Insiders have this since the delegates vote by numbered electronic devices.

9. Blockage of news of key member initiatives such as the 2006 move by Central Michigan to give the Assembly power over the board, copying ABA and AMA. No other chapter supported CM whose bid lost by a 261-19 vote. CM called the Assembly “a rubber stamp.” PR Society news media carried no mention of the proposal made in April 2006.

10. Leaders defend the $140,000...
“Leadership Rally” that brings chapter presidents-elect to New York each June, compromising their independence, even though budget cuts are needed and national seeks a $30 dues hike. The Assembly is mostly chapter presidents and presidents-elect. Attendees at the “Rally” get a $550 stipend plus five free meals.

11. Removal of the single list of the 110 chapter presidents from the Society website forces anyone who wants such a list, including the presidents themselves, to download all the sites. This website has done that and makes the list available to anyone who wants it.

12. Removal of the names and contact points of about 47 headquarters staffers, leaving only seven names. This loss of information makes it impossible to track staff turnover.

13. Society made huge decisions without any input from the Assembly including the move downtown in 2004 for 13 years, eliminating use by the New York chapter, and cancellation of the printed members’ directory. Leaders refuse to discuss having a PDF which involve no printing or mailing costs by national.

14. Refusal to investigate or disavow threats of physical violence made in person and in a letter to me by an Assembly delegate following the 2010 Assembly. VP-PR Arthur Yann has e-mailed that a national director witnessed this incident.

15. Refusing to compensate numerous authors after selling hundreds of thousands of copies of their articles from 1980-94. An exposé by me ended the practice.

16. The costly re-write of the bylaws at the 2009 Assembly violated major tenets of Robert’s Rules that forbid use of proxies and that demand that all articles in a revision be presented to the Assembly. Other advice ignored included not trying to do a revision at a regular meeting and having a large committee with all elements represented. Ten of the 11 committee members were APR when APRs are only 18% of the membership. Legal costs and bills from law firm Venable totaled $299,793 from 2007-09, an average far above previous years.

17. Further tightening insiders’ grip on governance by restricting officer nominations to those who have served on the board. The 2009 revision, turning its back on the wisdom of the founders who barred directors from returning to the board, provides that directors can serve two two-year terms in a row and can come back indefinitely after skipping one year.

18. Not allowing members to work at their own h.q. since about 1980, although the major professional groups such as ABA, AMA, AICPA and ASAE have large numbers of their own professionals on staff. Only three of the 50+ Society staff are members and they are under tight control of management.

19. Failure to discuss the unusually high percentage of Society income devoted to staff pay/fringes — $5,529,699 in 2010 or 52.5% of revenues of $10,513,366. Average percentage of similar-sized groups is close to the 40% or lower range. Many groups have kept a New York h.q. but put “back office” operations in much cheaper locales.

20. Avoidance of New York as the site of the national conference (only once in the current 23-year period) has cost the Society millions because New York has by far the biggest audience. The 4,000 record for attendance was achieved at the 2004 conference in New York. Oddly, Philadelphia was the conference site in 2007 and will be again in 2013 while no New York conference is currently scheduled.

People in PR

PADRES ENLIST PR, MILITARY RELATIONS EXEC.

The San Diego Padres have brought in former presidential aide and D.C. insider Sarah Farnsworth as senior VP of public affairs for the Major League Baseball franchise.

Farnsworth joined the team on Sept. 12 overseeing communications, community relations and military affairs.

The California native exited Washington after nearly two decades, most recently as Deputy Assistant Secretary of Defense for Community and Public Outreach at the Pentagon, where she was the department’s primary liaison with veterans and military service groups.

The Padres organization is close to the large San Diego military community and was the first professional sports team to create a military affairs unit in 1995.

In a statement, Padres COO Tom Garfinkel noted Farnsworth’s “extensive” experience and in strategic communications and public affairs, adding that her “extensive knowledge of the political and military landscapes will help us elevate our efforts to support and honor those who serve our country.”

Sue Botos was promoted to VP/Community Affairs in February by the Padres, overseeing corporate and player philanthropy, Latino affairs, fundraising and charity, in addition to military affairs and community outreach.

Farnsworth was Chief of Staff and Senior Advisor to President Obama’s National Security Advisor, Gen. Jim Jones, who she worked with previously at the U.S. Chamber of Commerce in 2007. She was also senior VP and chief of staff at the USO World Headquarters for six years, overseeing strategic planning and external relations, and was an aide to President Clinton and First Lady Hillary Clinton.
FDA plans anti-smoking RFPs

The Food and Drug Administration issued two solicitations in September for PR programs funded under the 2009 law that imposed new warnings and regulations on tobacco products and gave the FDA authority over the sector.

Both RFPs are intended to select pools of firms to compete for and handle communications projects over the next five years for assignments related to the Family Smoking Prevention and Tobacco Control Act passed in January 2009. That law gave the FDA the authority to address both tobacco dependence and its use by young people, nearly a decade after the Supreme Court said in 2000 that the FDA didn’t have such power.

One RFP will be geared for large-scale, national PR efforts, while the second focuses on targeting at-risk and underserved populations.

The resulting contracts will be with the FDA’s Center for Tobacco Products.

Former senate PR aide to QGA

Jim Manley, who stepped down as Sen. Harry Reid’s spokesman and communications director late last year, is joining QGA Public Affairs in the capital as a senior director.

Manley, who joined Reid in 2004, was an aide to Democratic Sens. Edward Kennedy (Mass.) for 12 years and George Mitchell (Me.), in addition to Reid (Nev.) for more than two decades in the Senate.

He said in November that he was “itching for a new adventure.”

At QGA, a WPP unit, he’ll focus on communications and government affairs clients with a goal of expanding its public affairs practice.

The firm’s announcement of Manley’s hiring today carried an endorsement from Reid. “After 21 years in the Senate, no one knows more about Capitol Hill and how Washington works than Jim,” said the senator.

QGA president John Feehery, a former aide to Republican House Speaker Dennis Hastert, said he and Manley “have had our fair share of political disagreements over the years,” but noted they developed a mutual respect in friendship in that time. He called Manley’s hiring a “major coup” for the firm.

FCC vet joins Comcast

Rebecca Arbogast, managing director at Stifel Financial, has joined joining Comcast as VP-global public policy.

She will be based in Washington.

Prior to Stifel, where she handled legal and regulatory matters concerning media and technology companies, Arbogast served as chief of the Federal Communications Commission’s international telecommunications unit.

She also worked in the Justice Dept.’s office of legal counsel.

At Comcast, Arbogast will report to Kyle McSlarrow, president of Comcast/NBCUniversal.

Morrell to head BP’s US PR

Former Pentagon press secretary Geoff Morrell has been tapped to head communications for BP America as the company continues a long slog toward repairing its image in the wake of the 2010 Gulf oil spill.

Morrell stepped down as Deputy Assistant Secretary of Defense for Public Affairs in June, following Secretary Robert Gates out the door after four years spanning the Bush and Obama administrations. He was previously a TV journalist, exiting ABC News for the Pentagon in 2007 after covering the White House.

At BP, he reports to U.K.-based Peter Henshaw, group head of communications, and oversees the company’s internal and external communications in the Americas.

Henshaw, a 30-year BP veteran, took the communications reins for the company in January after former Financial Times editor Andrew Gowers left the company’s top media relations post in late 2010. Also in January, BP named its Florida spokesman for the crisis, Ray Dempsey, as its Washington, D.C., liaison.

BP has continued a PR and legal barrage since the Deepwater Horizon accident. It faces several lawsuits, including from the U.S. Justice Department, as well as a suit filed as recently as Sept. 1 by Deepwater Horizon partner Halliburton.

George Little took over the Pentagon press podium in July.

APCO aligns with Condi Rice

APCO Worldwide has struck a partnership with the firm of former Bush administration cabinet and security aides Condoleezza Rice and Stephen Hadley.

Rice, the former Secretary of State and national security advisor, set up RiceHadley Group with her NSA replacement Stephen Hadley, and State Dept. political aide Anja Manuel in 2009 to advise corporations and executives on expanding to emerging markets like China and the Middle East.

APCO CEO Margery Kraus said the deal will add to her firm’s “business diplomacy” offerings aimed to help clients navigate “the political risks and challenges” of the global business scene.

Hadley and Manuel will serve as senior counselors in APCO’s Global Political Strategies unit.

Rice in a statement said her firm sees an opportunity to grow its scope with APCO, while Hadley noted the firm’s “on-the-ground” resources in 20 countries.
Bloomberg teams with Saudi billionaire for Arab TV push

Bloomberg has agreed to provide five hours of daily financial and economic news programming to Alarab, the 24-hour satellite TV channel that Saudi billionaire Prince Alwaleed bin Talal plans to launch next year to compete with Al Jazeera.

Bloomberg-branded reports will focus on the MENA markets and include features on business leaders from Saudi and the Gulf region. The media giant also will provide technical assistance to Alarab.

The new channel promises a menu of objective reporting on political, economic and social events in the Arab world.

“Our alliance with Bloomberg and its credible source of financial and economic data, together with its extensive media experience, will provide the Alarab news channel with a strong and comprehensive economic platform to accurately cover Saudi Arabia, and the rest of the Arab world,” said Prince Alwaleed in a statement.

The headquarters for Alarab has not yet been selected. Dubai, Abu Dhabi, Beirut and Manama are cities under consideration. Al-Jazeera is headquartered in Qatar.

Jamal Ahmad Khashoggi, media advisor to Saudi Arabia and former Editor-in-Chief of Al-Watan, will lead Alarab. He’s a frequent commentator on the BBC and Voice of America. Alarab is not affiliated with BBC or PBS.

Ketchum lands Australia

Ketchum has landed Tourism Australia’s PR account for the Americas, following an RFP review. Fleishman-Hillard handled the account for the past three years.

Ketchum’s Los Angeles office locked up a three-year contract which started on Sept. 9 to guide PR programs covering the U.S., Canada and Latin America.

Tourism Australia’s VP of the Americas, Daryl Hudson, said the Omnicom unit showed a solid understanding of the business as well as “the future of public relations,” adding a desire to capitalize on the digital realm.

He said F-H did a “great job” over the past three years, including the rollout of its current campaign, “There’s Nothing Like Australia,” and playing a key role in Oprah’s PR blockbuster visit earlier this year.

Ketchum’s three-year pact also carries a year-long option.

FAIA News

NEW FOREIGN AGENTS REGISTRATION ACT FILINGS

Below is a list of select companies that have registered with the U.S. Department of Justice, FARA Registration Unit, Washington, D.C., in order to comply with the Foreign Agents Registration Act of 1938, regarding their consulting and communications work on behalf of foreign principals, including governments, political parties, organizations, and individuals.

Burson-Marsteller, Miami, Fla., registered September 7, 2011 for Uruguay Ministry of Economy and Finance, Montevideo, Uruguay, regarding conducting research on the international perception of Uruguay as a destination for tourism and investment.

India Tourism Office, Los Angeles, Calif., registered September 6, 2011 for Government of India, Ministry of Tourism, New Delhi, India, regarding promotion of tourism to India from the West Coast of the United States and Mexico through advertisements in newspapers, magazines and on billboards, and through joint seminars, participation in travel shows and more.

The Moffett Group, Washington, D.C., registered September 8, 2011 for Office of the President of the Puntland State of Somalia, regarding advocating for the principal before Congress, the Administration and other U.S. entities and working towards the goals of promoting peace, security and political stability in Puntland through socio-economic development and helping Puntland benefit from its own natural resources.

Lobbying News

NEW LOBBYING DISCLOSURE ACT FILINGS

Below is a list of select companies that have registered with the Secretary of the Senate, Office of Public Records, and the Clerk of the House of Representatives, Legislative Resource Center, Washington, D.C., in order to comply with the Lobbying Disclosure Act of 1995. For a complete list of filings, visit www.senate.gov.


The Nickles Group, LLC, Washington, D.C., registered September 14, 2011 for the National Association of Convenience Stores, Alexandria, Va., regarding credit card swipe fees and FDA menu labeling requirements.
Get 100 to 400+ placements from U.S. dailies and weeklies. We cover 10,000+ newspapers. We send in a variety of formats including CDs, repro proofs, e-mail and RSS Feeds via our www.napsnet.com Web site for editors. Complete satisfaction with the results of each release or another one free.

NAPS is used by most Fortune 500 companies, nearly all the 100 largest national advertisers, all top-20 PR firms, over 100 associations and many government agencies.

Impact Communications, 11 Bristol Place, Wilton, CT 06897-1524. (203) 529-3047; cell: (917) 208-0720; fax: (203) 529-3048; JRimpact@aol.com, Jon Rosen, President.


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Contact: hr@aga.org

Director, Public Relations
American Gas Association

You’ll be responsible for the development and execution of a broad range of activities designed to promote, enhance and protect the natural gas brand. This position serves as an ambassador for the industry and is expected to build and utilize strong relationships with the key media outlets to advance the industry’s position with relevant constituents.

Additional responsibilities include creating a full and diverse set of communications products and services targeted to the media and the general public including: press releases, publications, articles, web/social media, fact sheets and AGA’s “playbook”. The Director, Public Relations is expected to effectively collaborate with key AGA leadership and staff responsible for federal and state advocacy issues as well as serving as the public relations counselor to all AGA leadership and staff.

The position requires a bachelor’s degree (graduate degree preferred) and extensive experience in developing and conducting media relations activities. Proven successful writing and editing experience with media and other external audiences; exceptional public speaking and presentation skills; ability to build strong, trustworthy relationships and work effectively with a variety of audiences are essential. The position will require domestic travel.

Trade association experience and a working knowledge of natural gas industry issues and terminology are desirable.

Contact: hr@aga.org

To be featured in the monthly Buyer’s Guide, Contact John O’Dwyer, john@odwyerpr.com
Get O'Dwyer's Newsletter, Magazine & 2011 Directory of PR Firms plus a year’s access to all our web content for $295

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Mental Magic Software
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Quasar Financial
Tellula Tourism Council

Listings are indexed alphabetically, geographically and by the following 20 PR specialties:

- Agriculture
- Beauty & Fashion
- Books & Publications
- Educational Institutions
- Entertainment/Cultural
- Environmental/Public Affairs
- Financial PR/Investor Rels.
- Food & Beverage
- Foreign Markets
- GreenTech
- Healthcare
- Home Furnishings
- Lifestyle
- Mobile/Wireless
- Multicultural Markets
- Political Candidates
- Professional Services
- Real Estate Finance & Dev.
- Sports/Leisure
- Technology/Industrial
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