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EDITORIAL

Why Romney has failed to captivate America

Unless you’ve been living under a rock for the past month — or getting your information from Fox News — you’d know things have gotten bad for Mitt Romney. Recent polls unanimously show him trailing in key battleground states, with some now giving Obama as much as a 10-point lead in crucial Ohio territory. While a Romney win was a foreseeable reality as recent as late summer, he’s now being rendered a distant memory. What happened?

Sure, there have been gaffes: regarding the U.S. Consulate in Libya, in recordings capturing him dismissing 47% of Americans, on proper pet-handling protocol. There were fabled tax returns, a Republican National Convention that looked like a scene from a David Lynch film, and a cadre of poorly behaved conservatives who cast a guilt-by-association net over the entire GOP. There’s the distinct possibility he’ll be trounced in the upcoming debates. Still, none of these factors are deal breakers.

In fact, the biggest problem with Mitt is that, with a month to go before Election Day, he has yet to deliver a solid, tenable, comprehensible economic plan, at a time when the American public is clamoring for one. Considering the economy has consistently been our number-one concern, you’d think the candidate who claimed to be the vanguard of business would identify a palpable solution to get us jobs, to improve our GDP, to get us out of this mess. Even teaming up with policy luminary Paul Ryan hasn’t resulted in a single, digestible economic aphorism. Instead we’ve gotten more placating generalities, paint-by-numbers platitudes, and half-baked promises.

Then there’s the ongoing turmoil in the Middle East. On the face of it, widespread riots and an ambassador assassination are events that bode historically awful for a President. Magically, Romney managed to transfer the heat off Obama’s lap and onto his own with a series of poorly timed and notably stupid remarks, simultaneously proving himself a true dullard in handling international crisis.

After more than a decade of Middle Eastern military engagements, Americans have grown tired of war-mongering. We want someone who will pick up the diplomatic pieces, not grind them into dust.

Of course, there’s also the fact that Romney isn’t very likeable. This time last year, voters were enamored with every other flavor-of-the-month candidate until scandal or dwindling campaign funds eventually left Romney the last man standing. Even Fox News’ most popular pundits were perpetually slagging the guy before he sealed the nomination. Of course, part of this is because Romney looks bad on paper. It’s a tough sell to get southern evangelicals to vote for a Massachusetts Mormon who created the forerunner of Obamacare, but considering his constituency’s feelings on the guy currently in office, it’s isn’t impossible. Leave it to Romney to liter an almost guaranteed trail to victory with enough faux pas to make the average viewer throw up his hands and scream, “does he even want the job?”

The final problem is that there are opposing forces currently working against the Republican narrative. Our economy is improving. The job market has picked up modestly, we just finished the highest third-quarter in two years, and a recent report by Bloomberg shows we’ve now created a million more manufacturing jobs than when Bush left office. America’s good news is happening at a terrible time for Mitt.

These factors have left the Romney campaign thrashing like a wounded animal. For every promise of a campaign “reboot” we’ve witnessed another cringe-inducing PR folly. Mitt’s gotten so desperate he’s now extolling the virtues of his Obamacare antecedent on the nightly news (his spokeswoman did the same thing in August, famously raising pundit outrage).

Apparently the Romney campaign has forgotten that “socialized medicine” remains a thorn in his core constituency’s collective side. Healthcare has been an issue that has repeatedly come back to haunt Romney — this time it may do him in for good.

At times, Romney’s grab for the Oval Office seemed like easy pickings. Americans remain angry, and Obama hasn’t done a good job of keeping his base pacified in the last year, with drone strikes, a reprisal of Bush-era surveillance tactics, indefinite detention legislation, and even skipping talks with leaders during the UN Assembly a scant week after half the Middle East erupts in violence due to the release of an independent American film. Then there’s Obama’s own noticeably maladroit campaign platform. Unlike 2008, Bam is no longer riding on fevered idealism. In fact, his core reelection message, if paraphrased, sounds like this: “I know things haven’t gotten any better. Just give me some more time to fix it.” It should be easy to beat this guy. I mean, if you can’t defeat a message this weak, what does it say about your party? Is the competition really that bad? Apparently, it is.

— Jon Gingerich
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U.S. buys ad time to deflect anti-Muslim film furor

In reaction to a wave of anti-U.S. violence that has swept the Middle East, the State Department is now buying Pakistani TV time to promote tolerance and rebuff anti-Muslim sentiment in the U.S.

By Greg Hazley

The U.S. State Department is buying ad time on Pakistani TV to show messages from President Barack Obama and Secretary of State Hillary Clinton distancing the U.S. from an anti-Muslim movie clip that has incited violence in the Middle East.

State Department Spokeswoman Victoria Nuland said in a September press briefing that the government has spent about $70,000 to buy time on about seven stations in Pakistan to show clips of speeches by the two top U.S. officials in the wake of widespread condemnation of the film, “The Innocence of Muslims.”

Large protests in Islamabad against the film and U.S. last month, some of which turned violent, involved tens of thousands of people. U.S. consulates in Lahore, Karachi, and Peshawar were closed, although the embassy in Islamabad remained open.

“As you know, after the video came out, there was concern in lots of bodies politic, including Pakistan, as to whether this represented the views of the U.S. government,” said Nuland.

“So in order to ensure we reached the largest number of Pakistanis — some 90 million, as I understand it in this case with these spots — it was the judgment that this was the best way to do it.”

In one ad, Clinton directly addresses the anti-Muslim film. “Let me state very clearly that the United States has absolutely nothing to do with this video,” Clinton says, according to Nuland. “We absolutely reject its contents.”

In another ad, Obama says the U.S. has been a “nation of respect” since its founding “that respects all faiths.” He adds, “We reject all efforts to denigrate the religious beliefs of others.”

The ads, which are subtitled in Urdu, carry the U.S. seal and carry notice that the message was paid.

Nuland said the U.S. has bought ad time in a “select group of other countries” at other times in the past “when you’re working in a media environment where this kind of purchase of public service announcements is the norm for getting your message out.”

“I think the sense was that this particular aspect of the president and the secretary’s message needed to be heard by more Pakistanis than had heard it, and that this was an effective way to get that message out,” she said.
Healthcare on the Hill: top events of 2012 (so far)

2012 has been a watershed year for healthcare. Here’s a list of the most talked about political healthcare events to occur in Washington this year.

Even before the presidential election came into full swing, there were a number of events and initiatives in Washington D.C. this year that healthcare communicators should be knowledgeable — or at least informed — about.

The Affordable Care Act

The most visible healthcare related milestone is the June 28th Supreme Court ruling that the Affordable Care Act (ACA) was constitutional. High profile though the decision was, it is only the final word legally (for the moment), not politically. The focus for the ACA has now shifted back to politics; given the Romney campaign’s commitment to repeal what they describe as “Obamacare,” its future hinges on the outcome of the presidential election.

Right now, the hot topic in the public domain is the two parties’ different approaches to funding Medicare. We can expect this issue to remain central to candidates’ discussion as both try to woo elderly and baby-boomer voters in the next few weeks.

Biologics Price Competition and Innovation Act Developments

One of the most interesting provisions of the Affordable Care Act is the Biologics Price Competition and Innovation Act. On February 9th, 2012, the Food and Drug Administration (FDA) released three long anticipated draft guidelines sketching out the agency’s advice to drug manufacturers when developing and submitting applications for generic biologics (called “biosimilars” or “follow-on biologics”) to the FDA. While seven of the top ten selling drugs in the United States are biologics, biosimilars have not historically been approvable in the U.S. Whether biosimilars will be approved by the payor community is debatable, as they are expected to come in at only a 10-20% discount compared to the innovator therapies; a substantially smaller decrease than the figures for small molecule drugs that go generic, and possibly not enough to convince U.S. payors to justify or force the switch from available biologics. Still, several major companies such as Amgen, Merck, Pfizer, Novartis and Biogen Idec have announced that they are embarking on biosimilar initiatives.

If biosimilars are ever approved for the U.S. market, there is a heavy communication task ahead for biosimilar manufacturers. Manufacturers will need to show healthcare providers, patients and payors that their products are safe and interchangeable. Costs will still be high, necessitating patient support services and co-pay assistance at a level similar to biologic innovator products. In tandem, makers of biologic innovator drugs will have to make good use of communications to maintain their product position, similar to how makers of small molecule drugs respond to their patented drugs going generic.

Physician Payments Sunshine Provision

Meant to take effect on January 1st this year, the Physician Payments Sunshine Provision requires that drug, medical device and medical supply manufacturers disclose on a central website every payment or object above $10 given to physicians and teaching hospitals — or face a significant fine. However, the response from the industry has been overwhelmingly negative, with the Center for Medicare and Medicaid Services (CMS) currently working through 500 comments submitted during the public comment period. CMS has therefore decided to push the provision’s start date to 2013. Interestingly, Massachusetts, the only state to currently have a similar law in place, recently repealed its disclosure law.

If (or when) the Physician Payments Sunshine Provision comes into effect, there will be a number of implications, including more onerous record keeping and the potential that doctors will shy away from getting involved with the pharma industry out of fear that patients will question their integrity.

American Pain Foundation Shutdown

American Pain Foundation (APF), a non-profit organization, announced its shutdown in May, “due to irreparable economic circumstances”, following an investigation by ProPublica into its funding from drug companies (90% of its budget according to the APF’s annual report). This triggered a response from Senators Max Baucus (D, MT) Chuck Grassley (R, IA) to the APF suggesting drug companies “may be responsible at least in part, for an epidemic of accidental deaths by addiction, by promoting misleading information about narcotic painkillers’ safety and effectiveness.”

What does this mean for healthcare communications? First of all, we might see a gap in pain advocacy for patients. We can also expect further scrutiny and less credibility for advocacy groups in other categories, as well as greater reluctance from advocacy groups to partner with pharma.

PDUFA reauthorized

First signed in 1993, the Prescription Drug User Fee Act (PDUFA), which mandates that drug companies contribute money to cover FDA review services, was reauthorized for the fifth time in July 2012 by a solid margin. PDUFA hopes to result not only in faster approvals for generics and for treatments for life-threatening conditions but also fewer drug shortages.

A PDUFA-related communications challenge to watch? There have been some rumblings that industry contributions to FDA approval budgets create an inappropriate closeness between drug companies and regulators.

What does this mean for healthcare communicators? This year so far has seen a great deal of change in D.C., coupled with some stagnation surrounding, for instance, the Physician Payments Sunshine Provision. Pair that with a good deal of tension and evolving economic and political dynamics and you have a recipe for lots of uncertainty for healthcare companies. For healthcare communicators, this means we have to proceed with a finely tuned combination of flexibility, trial and error and a great deal of specialized knowledge.

Jill Dosik is President of GCI Health.
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Building health exchanges with the public in mind

The Supreme Court has spoken. Now states across the country — or at least 13 of them — are furiously working to implement health exchanges as required by a central element of the Affordable Care Act. But what are the health exchanges anyway?

By Michal Regunberg

The exchanges are the equivalent of an insurance super highway. It’s where the public and small businesses will be able to go and compare and shop for health insurance both subsidized, for those who qualify, and non-subsidized. Each state will build its own, if they so choose, and that involves a lot of technology and a real understanding of the kind of information that the public will need to make an informed decision. By November 16, states have to let the federal government know whether they are going to build their own exchanges or leave it to the federal government.

The exchanges themselves have to be up and ready to roll by January 2014 when individuals must have insurance as required by law. And it’s estimated that by 2016 as many as six million individuals will pay the penalty for not having insurance.

Even as the exchanges are being built and the infrastructure put in place to enroll millions of people, there’s a parallel effort that has to take place to make sure the public understands and is on board with the move to the exchanges. Because, ultimately, the question becomes: If you build it, will they come?

As a recent New York Times article detailed, California is spending $900,000 to design and implement a public outreach campaign across the state. It will involve dozens of languages to reach the diverse populations that make up California.

The Robert Wood Johnson Foundation, through its signature “Aligning Forces for Quality” initiative across the country has also built in and is supporting efforts to engage patients and consumers about what it means to create a “patient-centered” system of care.

The hurdles are steep: For years the conversation about changing and improving care to focus on the patients has been happening above the heads of patients and consumers. The language is foreign — it may as well be Greek — and likely intentionally so: Accountable Care Organizations, Medical Homes, HIT or EHR, global payments, quality measures. That’s obviously got to change.

Healthcare is also one of the critical issues that make people — especially independent young men and small business owners — two of the key target audiences — wary of intrusion. This is particularly true when the perceived “intruder” is the government. Surmounting the natural suspicion around such a personal issue requires building trust through common allies and trusted peers and leaders.

The Massachusetts experience: We in Massachusetts have a unique perspective on all of this. We built the first exchange — The Connector — when the Commonwealth passed health reform in 2006. Today, 97% of the public has health insurance, the highest rate in the nation. There are valuable lessons learned that we, as PR professionals, can offer others to avoid some of the potential pitfalls that come with any enterprise this far reaching.

Massachusetts has been fortunate. From the beginning of health reform, there has been a coalition of business leaders, providers, payers, advocates, and policymakers who all understood the importance of the effort. They understood the far-reaching impact it would have in every corner of the state and the need to craft and deliver messages that would reach a diverse audience, from the young carefree guy who never thinks about going to a doctor until he breaks a bone skiing, to the small business of 10-25 employees struggling just to make payroll, to a small profit where health insurance is unaffordable, to the hospital staff who see the uninsured on a daily basis and provide the same level of care no matter who’s paying the bill. They are often the first to meet the uninsured.

The good news is there are, in every state, a number of organizations that represent small businesses, hospitals, health insurers, consumer advocates and others who can help deliver the message about the importance of the exchange to the diverse audiences who will have the ability (and the obligation) to sign up for insurance.

Here are some of the lessons learned from the Bay State experience:

Define the message: The first step is tailor messages for the various audiences. What small businesses or insurance brokers may need to know is very different from what consumers want to know and can understand. There has to be a segmentation of the audience and research done to know what will move them to act. Once you’ve got that in hand, finding the right way to deliver the message becomes a lot easier.

Create partnerships: In Massachusetts, the hospital association, for example, took the first step. They understood that hospitals, which have a vested interest in making sure that as many people as possible come through their doors with insurance, were more than willing to be a frontline to begin to reach both small businesses and consumers. In their individual communities, they are often the largest employer and therefore have a built-in relationship with the business community. They are, thus, a great venue for an informational session for small business that both reinforces their central role in healthcare delivery as well as in promoting and sustaining their communities.

Engage the public: Beyond that, there needs to be an aggressive ground and air effort that informs the general public with messages that will move them to act. Capturing and telling stories about real people are obviously important toward that end. One of the criticisms about how the Affordable Care Act (ACA) has been sold is that we have not seen the real stories of people who have benefited by ACA. Without those stories, it’s easier to dismiss the effort rather than building support. Every individual or small business who understands the benefits and who signs up can and should be a champion for the larger effort. It’s the surest way to maintain and sustain the momentum.

Michal Regunberg, Senior Vice President, heads the healthcare practice at Solomon McCown & Co. in Boston.
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A Creston Health company
Healthcare goes electronic, some assembly required

Technology-driven disruption isn’t new. Just ask the Wright Brothers or Thomas Edison. But while those iconic “discoveries” are the stuff of legend, our technological innovations today are practically ineffable by comparison. In fact, we’re approaching Vernor Vinge’s “singularity,” made popular by Ray Kurzweil, where technology transforms instantly, perpetually and most important, unpredictably.

By Scott Bauman

In healthcare, electronic health records (EHRs) and health information exchanges (HIEs) are two areas where technology is driving massive change. Indeed, EHRs and HIEs are transforming healthcare, but first it’s important to provide a little context.

Disruption occurs so organically these days that in many cases we’re already transformed before we realize it. The first time that you receive an offer from your favorite restaurant on your smartphone it feels transformative: things seem to change overnight. But the technology infrastructure in place to support that mobile commerce actually traces its roots back fifteen years ago to 1997, when Coca Cola started accepting payments via SMS for its vending machines in Finland. The offer you receive via SMS today comprises many add-on disruptions “discovered” since 1997, including embedded GPS capability, but most consumers are unaware of these complex, but integrated innovations that exist largely “under the hood.”

On one hand, technology disruption in healthcare is similar to consumer markets because the underlying technologies aren’t new. It’s the application of these technologies that makes headlines today. Unlike the mobile commerce example above, however, consumers won’t (already don’t) tolerate any ambiguity, and marketing-speak won’t help, especially with such tight regulatory oversight and well-publicized privacy concerns. If you’re a professional communicator working in healthcare and related disciplines, you can’t fake it. You absolutely must understand the transformation we’re experiencing as well as the underlying technology. Otherwise, how are you going to explain what’s next to consumers?

The Health Information Technology for Economic and Clinical Health (HITECH) Act, part of the American Recovery and Reinvestment Act of 2009, is designed to promote the adoption and “meaningful use” of health information technology. Since this article is not an in-depth overview of HITECH, let’s simply establish that the Act calls for “incentivized EHR adoption” by providers in a way that achieves “significant improvements in care.” Adoption isn’t the goal, effective [meaningful] use is. By the way, after 2015 the incentive-only provision ends and failure to adopt EHR will lead to penalties that include increasing reductions in Medicare payments to laggard providers.

This means that between now and 2015, healthcare providers will be fixed on EHRs. You, the professional communicator, must be too. The “E” in EHR, electronic, frees providers to harness technology to make patient information more meaningful to them. This is important because HITECH adoption occurs in three stages: after stage one, which roughly comprises better data capture and sharing, the real benefits — to both patient and society — take root, but only if the system is properly designed and implemented.

So here’s where an understanding of technology is crucial. What back-end technologies, such as business intelligence (BI) for example, are needed now for more effective data management, sharing and access down the road? What features will best enable consumers to access, use and proactively manage their healthcare? It could be a specially-designed consumer portal. It might include smartphone-enabled features. And what technologies, perhaps integrated with traditional communications, will help providers adhere to, possibly even exceed, meaningful use requirements?

Before you answer these hypotheticals, let’s also consider HIE. HIE is all about interoperability. In fact, many see HIE as critical to fulfillment of stages two and three of the HITECH requirements. In other words, without standardization and the “networked” features of an HIE, the meaningful use requirement falls apart. With it, however, all-important patient engagement can and should increase, including offering the option for patients to submit data online for universal access, the provision of translated patient educational materials and enabling patients to update and revise records themselves.

All of this requires complementary approaches that combine technology, data and usability in ways that foster engagement and improve doctor-patient communications. The result is better outcomes that ease burden on the system as a whole. So what is the role of the professional communicator in all this? For years, we’ve seen a natural — and powerful — hybridization of the marketing and IT functions. In some companies, CMOs and CIOs are becoming one, or at least collaborating as if they were. This is critical because technology and communications, the assumed bailiwick of marketing, are more closely aligned — or at least should be — than many realize. In fact, industry analyst firm Gartner predicts that by 2017, the CMO will spend more on technology than the CIO.

If EHRs and HIEs are intended to drive meaningful use, they must first enable providers to drive awareness, affinity and action, often in that order. If professional communicators are not strongly advocating for systems that are purpose-built for streamlined communications and patient engagement, the most important points of view are left out: those belonging to consumers. After all, communicators should be patient advocates too, mining social media, patient surveys and other information to ensure that provider adherence to HITECH isn’t generic or formulaic, but instead is transformative, as intended.

So how can you get started? To begin with, attach yourself to the EHR and HIE process and take inventory of all the places where patients will engage with your brand (yes, every provider is a brand or part of a brand). Have an opinion on the technology infrastructure. Understand how usable and accessible systems will be. Ask probing questions about usability, mobile access, interoperability and standardization. Your brand’s HITECH adoption effort may not fail because of any one of these issues alone, but it many never achieve success without them.

You see, the disruption in healthcare that we’re living through today isn’t as much about privacy — that’s only one issue: It’s about dramatic transformation. It’s about creating singularity in healthcare, a technology-enabled system that doesn’t just heal itself. It helps each of us heal ourselves.

Scott Bauman is Executive Vice President of Greenough in Boston.
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Hospital leaders wary of industry reform

Many hospital leaders say health reform is creating an environment where payors are gaining power, rates are getting tougher, and any benefits that are created are more than offset by a litany of negative factors.

This is just one of the conclusions from a recent ReviveHealth survey that polled hospital CEOs, CFOs and payor relations executives who negotiate managed care contracts with national health insurance companies.

Seventy-six percent of those surveyed said reforms would decrease their private payor rates, a four percent jump from last year.

Respondents represent 35% of hospitals in the U.S., up from 28% who participated last year.

“Hospitals really believe that health reform is taking a difficult environment and making it more difficult,” said Brandon Edwards, President and Founder of ReviveHealth. ReviveHealth is a strategic communications firm specializing in health services, health technology, and health living.

A big fear for hospitals is that employers will dump their company-sponsored health plans and send more and more employees to the newly created health exchanges, according to Edwards.

As it stands now, hospitals only profit from treating commercially insured patients and lose out on Medicare and Medicaid treatment.

Payors might take advantage of the exchanges and offer hospitals reimbursement rates similar to those for Medicare/Medicaid patients.

“Most employers will realize it makes no sense to continue an employee-sponsored health plan and will pay the subsidy to send employees to the exchanges,” Edwards said.

In order to combat this trend hospitals will have to make extreme cost cuts, altering the way they deliver service while smaller hospitals will most likely sell out to big health systems, according to Edwards.

Brandon Edwards

“Shady” business practices

WellPoint came in as the country’s worst ranked health plan, their bad reputation driven by corporate behavior.

Independent, nonprofit BlueCross plans continued to rank the worst on payment rates for health care delivered.

“WellPoint has earned its bottom spot in the 2012 survey this year through aggressive behavior with hospitals all over the country,” Edwards said.

Hospital executives are more concerned than ever with protection from denials and complex contract language that reduces payment yields well below what’s expected after negotiations are completed.

There are an increasing number of public contract battles between payors and hospitals with WellPoint involved in five times the number of disputes than all other Wall Street payors combined over the past year.

“The dominant market share of WellPoint and nonprofit BlueCross plans has created a huge problem for hospitals struggling to survive in this environment, since they use that market share to enforce low payment rates and onerous contract language,” Edwards said.

“If a major health plan is shrinking, it’s almost guaranteed that providers don’t trust that health plan. If a major health plan is growing, it’s almost guaranteed that providers trust the plan. Oddly enough, that doesn’t mean that the plan pays providers the highest rates — there doesn’t appear to be any correlation in the data — but that membership growth and shrinkage is purely related to providers’ views of the plans. It’s so simple, yet such a powerful metric,” Edwards stressed.

A state-by-state look at the business practices of Anthem and independent Blue Cross Blue Shield plans can be found at www.feeling-blue.org, which offers news, trends, and financial updates.

Preventative care is key

Hospitals believe population health management to be an important focus with 71% reporting that they either have a program in the works or are planning one.

Edwards sees a very different health-care system going forward where there will be increasingly more interaction between doctors and patients, not just when they’re sick, but in order to keep them from needing the services of the hospital in the future.

Affordable Care Organizations are already being set up so that doctors can get paid to keep a group of patients healthy, Edwards explained.

Monigle Associates implemented the survey and those contacted by mail, e-mail, fax, and phone were asked to reply anonymously.

Data was collected from February through June 2012 and those contacted were screened to ensure they were responsible for negotiating contracts with major health plans.

Complete survey results are available at thinkrevivehealth.com.
Health-conscious manufacturer ANEROS debuted a revolutionary new product at the inaugural CatalystCon conference in Long Beach, CA, September 14-16. CT Schenk, CEO of Aneros, described CatalystCon as the “perfect venue” to introduce the Evi, an innovative hands-free kegel exerciser anatomically designed to fit all women.

“We chose this conference over the mundane trade shows,” Schenk said, “because our focus is on the message rather than distribution.”

CatalystCon is a conference created to “inspire exceptional conversations about sexuality” uniting sex educators, sex experts, health advocates, and activists. “I feel it was groundbreaking for Aneros to launch their product not at the traditional industry trade show, but instead at a conference that promotes sex education,” said CatalystCon creator Dee Dennis. “The message Aneros sent by debuting Evi at CatalystCon was their first concern is not bottom line or sales, but the sexual health and well being of those who will buy their product.”

Aneros has a long history of creating unique, anatomical products that promote health as well as pleasure and currently sells the only medically-patented prostate massager on the market. The Evi is their first product for women and can be used to gauge and increase pelvic floor strength.

“We started out as a health company and accidentally discovered a phenomenon in sexuality for both men and women,” said Schenk. “All of our products were specifically designed with the focus of improving symptoms of health problems.”

“The interesting thing we have found,” he continued, “is that so many people have learned to become in tune with their bodies through continued use which can lead to an improved quality of life.”

Sex educator Ducky Doolittle introduced the Evi to the conference attendees with a special seminar on kegel exercise and female anatomy. “Aneros understands the anatomy unlike any other company,” she said, as she explained the importance of strengthening the PC muscles in the pelvic floor, which control urine flow and contract during orgasm. These muscles can be weakened by pregnancy, childbirth, aging, obesity, and certain surgeries, which may result in urinary and bowel incontinence or uterine prolapse.

“One of the most exciting things to me about Evi is that we have already seen such an overwhelming response from so many women that know they have a need for this product,” said Schenk. “We are all very excited to see what Evi will be able to offer as an opportunity to improve the lives of women.”

“Using toys built for kegel strengthening will help you get there faster,” said Doolittle. “Without the toys, when you first start doing them they are totally annoying. But the more you do it, the easier it becomes.”

Aneros has signed on to be the Platinum Sponsor for CatalystCon East (www.catalystcon.com), which will take place March 15-17, 2013 in Washington, D.C.
Courtrooms become pharma’s latest nightmare

Litigation in the health products space is commonplace. In the courtroom, as in business relationships, a good name is essential. Solid reputation retains talented colleagues, physician willingness to listen to field staff, patient commitment to medication compliance and Beltway staffers’ open-minded perspective before jumping to policy conclusions.

By Gil Bashe

Today we see a very active front against the pharmaceutical industry ranging from plaintiff attorneys asking: “Have You Taken Drug NAME,” to Senate Congressional Inquiries or government agencies to US Attorney General investigations to disgruntled former employees. The reasons are too numerous to list. What is certain is if the target is large enough and there is something to be gained, it is best to have access to communications expertise.

Public relations practitioners require a place at the strategy table during legal disputes; especially when litigation is at hand. Their role in aligning opinions, marshalling efforts with advocacy, lobbying and media/reputation management, enable clients to guard hard-earned reputation and, if possible, avoid going to court.

Effective response to a legal challenge is essential to guard hard-earned reputation. These days, with so many opportunities to feed bloggers, pharmaceutical corporate communicators must be vigilant and prepared to respond. Once thought as peripheral to mainstream media, sources such as Main Justice and PharmaLot grab the attention for law beat reporters at national news outlets who are mining for big stories.

Should a PR agency determine legal strategy? No, facts and legal strategy drive communication, and, in turn, communication influences strategy. The six pillars of legal communications: authenticate, differentiate, align, accuracy, ally, assess and achieve — offer a framework for understanding and managing the flow of the dynamic.

Too often pharma communicators respond as events unfold and that results in a series of company tactical reactions that diminish communications strategy impact. In fact, failure to look at plaintiff motive — desire for visibility, policy impact or increasing the pain and therefore cost to settle — leads to half-baked one-step-at-a-time game plans that are changed constantly.

Authenticate
Too often, hypothesis over fact is driving planning. The first stop is to authenticate, differentiating assumptions and feelings from fact: Why were there no cases at dozens of other area hospitals that had also received the same product? How was the product received, stored, handled and administered? With patient safety paramount, making sure the action team has facts instead of open-ended questions sets the tone for ensuring people stop pointing fingers and begin to think about how to guard against immediate risks.

Accuracy
When the facts are validated, only then is it possible to move fast in response. One company facing government agency litigation diligently guarded its reputation, showing through the media that it was transparent and worked carefully to guard its constitutional rights, ensure access to care and cost sensitivity in accordance with U.S. patent law. Striking balance to Federal claims made national-level reporters realize that the “truth lies in the middle.” That is a critical territory pharmaceutical companies often fail to obtain.

Align
Shifting from feelings to facts, it’s time to engage proactively in answers to those anticipated questions. That is where the second tenant align messaging comes in. Ensure that everyone in the company’s legal, management, R&D, marketing, sales teams convey the same truths whenever and wherever they interface with customers — patients, physicians, payers and media.

Ally
Once core messaging around critical questions has been established, ally with experts who share and can amplify those truths. Cultivate and leverage third-party support, ideally before there is an issue. Always remember, that whether they agree with your position or have their own point-of-view neutral parties will be called upon to comment. If they have no background, they are apt to play it safe even at your expense.

Too often, companies feel groups or clinical experts are going to side with the naysayers. In reality, left with no access to company expertise or what reporters are likely to ask, their media comments are “quick think on their feet” reactions. When physician experts see both sides of the issue, they are apt to rely on data and facts. When that information is not in hand, their quotes are the result of responding to the reporters’ questions rather than helping frame the issue for patients.

Assess
During a court trial, it is vital to monitor real-time for litigation-related news. In all legal cases, assessing the social media horizon 24/7, preparing and updating standby statements and making executives available for media inquiries is imperative.

However, waiting for reporters to call with questions may be too late. Media look at online coverage to frame their story ideas. If the communications team is waiting for calls with Q&A in hand, expect the article results to disappoint. Court cases are fast-breaking news. Make sure target media know who to contact and don’t wait till they call — engage early!

Achieve
Think about the end-game — not the struggle! A rule of thumb: do not panic every time you see unfavorable coverage or blog posts. But do not stand idly by, either. Make sure key bloggers and reporters have the right information and connect with them to explain complex legal issues. Aligning opinions requires people have accurate information, so engage when information is incorrect.

PR professionals should work with legal colleagues toward achieving resolution of the dispute, using the clients’ company mission statement as a guide (e.g., putting patients first). PR and policy counsel must ensure that not just shareholders, but stakeholders including patients, healthcare professionals, policymakers, employees and payers trust a client’s actions. They may not all agree; however, there should be no doubt that what you are saying is true and therefore, providing the other side of a complete story.

Gil Bashe is Executive Vice President of Makovsky Health.
Influence = Results

[in-floo-uhns] noun, the action or process of producing effects on actions, behavior, opinions

[ri-zuhl] noun, a desirable or beneficial consequence, outcome, or effect

JPA.com

As leaders in health communications, JPA helps our clients reach the right influencers, including: media, advocates, policy makers and key opinion leaders. Our campaigns cut through the clutter and place your message in front of the right people at the right time.

Washington  Boston  Paris
When healthcare takes on the trade show

By Louise Pollock

We’ve all seen the jars of free candy, colorful logo pens and smiley-face stress balls that trade show exhibitors use in an earnest attempt to lure attendees to their booths. At larger healthcare professional meetings — such as those belonging to the American Heart Association or the Academy of Nutrition & Dietetics — there are many companies exhibiting, and very little time to get through the endless aisles of information. Although pens and stress balls are useful, you’ll really need to stand out if you want to grab attendees’ attention.

The first step to successful trade show marketing is setting a goal. Understanding what you want to get out of your booth investment will help you better plan how to go about achieving your goal. And keeping in mind what your target plans to get out of the meeting will help you determine the proper tactics to make the interaction mutually beneficial, and ultimately, ensure results.

Pulling from our experience with what works and what doesn’t, below are some ideas for maximizing your trade show investment, with targeted and strategic campaigns that will advance your business strategy.

Think out of the exhibit box

Although in most cases you need to be an exhibitor in order to gain access to the meeting venue, you shouldn’t let that limit your activities. Instead of getting caught up in the rat race of the exhibit hall, think of ways to enhance your meeting presence beyond the traditional booth. For example:

Aim for quality, not quantity. It’s obvious that the exhibit might be the best way to reach the largest number of people at once, but quantity doesn’t always mean quality. If your goal is to reach key opinion formers with specific messaging, or to gain insights from them for your company or brand, send invitations well in advance of the meeting and offer compensation for their undivided attention. Be sure to keenly target your invitation list to healthcare professionals who will be most valuable to your company or brand, and learn from the experts. For example:

For more information contact Don Hunt at dhunt@lambert-edwards.com.

• Get attendees talking about your brand online through cause-based social media engagement at the exhibit.
• Determine the most valuable information you hope to gain from attendees and prepare a quick and simple booth survey that will gather that insightful data.
• Provide a reason for attendees to stay at the booth for a while, such as a celebrity author book signing. Attendees will be happy to wait in line, providing you with invaluable time to drive your messages home and gain insights.

Even the most elaborate booths might not be enough to make attendees stop in their tracks, but add some fresh baked cookies or an aromatic cappuccino machine, and suddenly people can’t help but take a seat at your booth and stay for a while... especially at healthcare meetings, like the American Academy of Family Physicians. A small snack for time-crunched attendees will go a long way towards making your company or brand more endearing.

Don’t forget to capture contact information whenever you can. A simple “nice to meet you” note and free sample can go a long way to help build brand loyalty and reputation, and keep you top of mind with your target audience.

Louise Pollock is President of Pollock Communications in New York City.
Good, healthy conversations build good, healthy relationships.

Conversation starters.  public relations + multicultural strategy + community outreach + digital communications

www.openchannelsgroup.com + facebook.com/openchannelsgroup + twitter.com/openchannelspr
Personalized PR in an age of personalized medicine

Those of us involved in the life sciences industry today are working at a time of revolutionary change — the kind that comes along perhaps once in a generation. What’s truly amazing however, is the fact that we fortunate few in healthcare communications are practicing our craft in the midst of two such changes that are occurring almost simultaneously; changes that are transforming both the world of medicine, and how we communicate, forever.

By David Avitabile

We are now living in the age of personalized medicine. The ability to diagnose and treat human diseases based on molecular profiling is here, and our understanding of the science and how to translate genetic information into clinical practice is increasing exponentially. Ten years ago, the cost of sequencing a human genome was approximately $100 million. Today that cost is closer to $1,000, making this process accessible to most labs and hospitals. Efforts are underway to bring this cost closer to $100.

Biotechnology, pharmaceutical, diagnostics and health informatics companies are now commercializing products and technologies that enable healthcare providers to fulfill the promise of personalized medicine: the right treatment, for the right patient, at the right time. The Food and Drug Administration (FDA) is on board with personalized medicine, having now approved a number of drugs and technologies that use individual molecular profiles and other information to diagnose, treat and manage patients.

The commitment to advancing personalized medicine is growing increasingly stronger because governments, healthcare providers, insurance companies, life sciences companies and healthcare technology providers are seeing the enormous potential of personalized medicine to significantly improve health outcomes, reduce healthcare costs and increase efficiency. Those interested in really reforming healthcare should consider the fact that before personalized medicine, an estimated 30-50% of prescription drugs didn’t work for the patients who were taking them. Now think about the waste, in billions of dollars per year, involved in that number. Imagine if new advances in personalized medicine are able to reduce that number over time to less than ten percent.

Critics of personalized medicine, like critics of the internal combustion engine, biotechnology, space travel, computers and other such “newfangled” technologies, argue that the cost model doesn’t currently support widespread adoption, the science isn’t entirely understood and the status quo, which in this case is a healthcare system that will bankrupt our country if costs aren’t somehow brought under control, isn’t really all that bad.

There are challenges that must be met for personalized medicine to continue evolving and for it to become widely accepted as best practice. But keep in mind that we are in the early stages of this transformation.

The Human Genome Project was completed in April, 2003. A 2006 report from the Personalized Medicine Coalition (PMC) profiled 13 prominent examples of personalized medicine drugs, treatments and diagnostics products available. The most recent version of this report, revised in 2011, includes 72 prominent examples of personalized medicine drugs, treatments and diagnostics products now available. Clearly industry and the research community are meeting and overcoming the challenges inherent in commercializing personalized medicine treatments.

For those of us who are practitioners, students and advocates of strategic communications and its potential to promote positive change, the evolution of communications technologies, and the influence these technologies have had on how we serve our clients, has been just as transformational. What is really interesting is the fact that this evolution in communications has occurred at the same time as the evolution of personalized medicine.

In 2003, the year that the Human Genome Project announced that mapping the human genome was complete, MySpace was launched. In terms of social media, MySpace was really the first “shot heard ‘round the world.” Between 2005 and early 2008, MySpace was the most visited social media site in the world, surpassing Google in 2006 as the single most visited website in the United States. Simultaneously with the pace of changes taking place in diagnostics and personalized medicine, social media 1.0 was replaced by social media 2.0, when MySpace was overtaken by Facebook. Twitter, launched in 2006, currently has over 500 million active users generating over 340 million tweets daily.

As personalized medicine becomes increasingly more sophisticated, so does our ability to individualize and tailor treatments based on very specific patient information. And as social media evolves, so does our ability to identify and reach our audiences based on specific interests or characteristics, and tailor our messages specifically to those audiences.

Just a few years ago, pharmaceutical, biotechnology and medical technology companies were geared toward one-way communication. Legal, medical and regulatory teams reviewed all content before it was delivered to their intended audience. Unfiltered two-way dialogue was reserved for private meetings, corporate events, teleconferences and medical meetings.

Today’s life sciences companies have adapted to the evolving environment and are engaging in social media, and personalized communications, like never before. In addition to participating in existing channels including Twitter, Facebook, LinkedIn and others, some forward thinking life sciences companies have gone a step further and created their own social networks around specific diseases or unmet medical needs. In 2012, patients, physicians, influential bloggers and patient advocacy groups are engaging directly with healthcare companies via social media in ways that many thought would never be possible a few years ago.

The keynote speaker at a recent conference on personalized medicine stated that ten years from now, we’ll be looking back on today as a tipping point; a time of amazing progress in our ability to understand individual genetic variations underlying specific diseases and treating patients based on this information. I believe that in ten years, healthcare communications professionals will also look back on today as a time of transformational changes and growth in our ability to personalize our communication and tailor messages to specific target audiences using social and digital media platforms.

David Avitabile is President of JFK Communications, Inc.
In 1952, my father, Dan Edelman, founded our family business and proved that one person can make a difference.

Dan is a visionary who recognized the credibility and power of earned media to inform daily conversations and, in doing so, propel brands forward.

Dan’s imprint made a powerful impact felt across industries and forever changed the way we communicate.

Today, as the world gets smaller, the mandate of Public Relations is even more clear:
help develop authentic, intelligent and spontaneous two-way dialogue.

Like Dan 60 years ago, we recognize the most credible and powerful way for companies and brands to engage:

- We start with a breakthrough idea firmly grounded in business and communications objectives;
- We help bring it to life by highlighting what our clients do and say;
- We place purpose and participation at the heart of programming;
- We share our ideas through transmedia storytelling and compelling content; and
- We measure and validate the impact of our work.

At its best, Public Relations helps move business and society forward in a complex, ever-changing world.

Simply put, it is time for Public Relations to lead.

As we mark an important milestone for our firm – and an important moment for our industry – happy anniversary, Edelman, from Dan and the entire Edelman family.

Onward,

Richard Edelman

Share your thoughts on how we can #impacttomorrow
A n apple a day doesn't work any-
more. And why would you want
to keep the doctor away? It's
more important to keep special interests,
business and politicians at bay, but unfor-
tunately there isn’t an edible aphorism
that does that, especially if you’re sick.
Assessing the U.S. healthcare system
from a hospital bed, an emergency room,
your doctor’s waiting room, or from the
line at the drugstore, provides a  richer
understanding of what we do, politically
and personally, to stay unhealthy.

TGI Healthworks, a for-profit health-
care PR agency, and the non-profit
Global Healthy Living Foundation, a
patient advocacy and access-to-care
organization, were co-founded by Seth
Ginsberg who was diagnosed with
Spondyloarthropathy, a form of arthritis,
at 13. He and the co-founders and sepa-
rate managers of each organization,
which include the author, create programs
aimed at fundamentally changing the way
Americans perceive health, and the way
they pay for it. We see healthcare from
the sick person’s perspective.

However, attempting to utilize commu-
nication and advocacy to bring efficiency
to a system run on emotion by special
interests is more the definition of frustra-
tion than a plausible objective. But it
could also be the only way to improve
healthcare in the United States.

There are a few truisms in U.S. health-
care today, and most of them are disturb-
ing, regardless of a person’s political
position.

Medicare works and was put in place
by a Republican president — Richard
Nixon. Ninety-eight cents of every dollar
goes to patient care compared with as lit-
tle as 50-cents, and now 80-cents as a
result of the Affordable Care Act, that
goes into patient care in the private insur-
ance market.

Prevention is better than treatment
About half of us don’t take the medi-
cine we are prescribed for chronic, long-
term illnesses such as high blood pressure
and type 2 diabetes — two of many con-
ditions that cause early death and expen-
sive end-of-life care if not treated.
Sixty-two percent of us are overweight.
Twenty-eight percent of us are obese.
(2012 World Health Organization). That
makes us the fattest developed nation,
which puts us first in line for heart dis-
dease, diabetes, high blood pressure,
strokes, and worn out joints.

Politicians and business have made
our healthcare delivery the best
and the worst in the world — depending
on your ability to
pay, your education
level, and where you
live.

The United States spends nearly twice
as much per patient on healthcare as
Canada and some other European nations
with outcomes only half as good.
Medical care is rationed in the United
States, as it is everywhere. Most devel-
oped countries cover everyone, but not
every condition. The U.S. covers every
condition, but not everyone — even with
the Affordable Care Act.

We know we rank embarrassingly low
in global health statistics such as the
United Nations infant mortality rate
(34th), and even worse according to our
own Central Intelligence Agency World
Fact Book (49th).

Everyone will need healthcare at some
point in their lives.

We have not, as a country, rationalized
end-of-life care. The cost of the last six
months of life are staggering — with lit-
tle or no improvement in our quality-of-
life. We choose to die with tubes and
hoses going into and coming out of our
bodies, with family holding our hands
and businesses emptying our wallets.

We also know that regardless of our
political position, what news program we
watch, or whether we believe
“Government keep your hands off my Medicare,” is a sad statement, we are better off under the Affordable Care Act. A few examples:

Insurance companies can no longer deny coverage based on pre-existing conditions or cap the dollar amount of care. This means people will get the medical treatment they need without resorting to bankruptcy and increasing the tax burden on all of us by using state-provided medical care such as Medicaid. Before the Affordable Care Act, more than half of bankruptcies in the United States were the result of healthcare costs.

Tax credits for business ease the cost of providing healthcare to employees.

Everyone is eligible for some wellness exams and preventive care, including vaccines.

Seniors are eligible for prescription drug discounts.

Young adults can stay on parent’s plans until they are 26.

Eighty cents of every dollar spent for healthcare insurance must now go to healthcare, not profit, sales expenses or other costs. (Before the ACA, it was as low as 50-cents.)

Despite these facts — and they are facts — many people still put our healthcare decisions in the hands of politicians whose priorities are not us or our health, or with companies whose business strategies clearly are not aligned with our good health.

In a sensible United States, a single, non-profit entity, focused on health outcomes, and able to negotiate fiercely with all vendors in the healthcare system, would comprise the basic structure of healthcare delivery. Medicare the military healthcare system and TRICARE, come closest to this model in the U.S. But we are not a rational country when it comes to healthcare. When I talk with healthcare experts, patients and policymakers in other developed countries, they admit their systems have problems, but they all agree on one point — they would not trade their system for ours. Their systems reflect their country’s belief that healthcare is a right, not a negotiated privilege.

Private health insurance, which covers most of us in the United States, is the antithesis of efficiency.

It has to satisfy shareholders by making a profit. Even if it is legally a non-profit, it still accrues the equivalent of profits and competes in a for-profit environment.

It has administrative and selling costs which are only now regulated by the Affordable Care Act.

It is the entity which rations healthcare, without significant oversight, and always with a view to the bottom-line, by dictating how much it will pay for services, and what services it will pay for. Anyone with a life-threatening condition, or a chronic disease can relate horror stories of having to fight for care and coverage at a time when they are least able to fight.

We also, as a country, don’t take responsibility for our own wellness. Somehow we believe that drinking more than 16-ounces of sugary soda is our right, but moderation is not our responsibility. And if we have any doubts, the soda industry, on the back of its trucks, will tell us.

Somewhere, our healthy identity has been lost. It’s okay to waddle through Disney World eating a greasy turkey leg. It’s okay to sit in front of multiple wide-screen TVs watching sports, drinking and eating, and cheering on those who choose to be fit. It’s okay to consume a Big Gulp. It’s okay to join a gym and rarely go. It’s okay to display our stomach as we meet someone, almost as if it should be introduced separately, and wave goodbye with our butt. It’s okay for schools, when budgets get tight, to cut physical education and recess which benefit all students, but keep football, which benefits a few and relieves the rest to seats in the bleachers eating. And finally, it’s okay to pontificate about state’s rights and individual rights, and curse the “tax” of healthcare, and refuse, as a healthy 28-year-old to buy health insurance, and in 40 years or less, force your family to order the XXL 52-inch wide coffin.

Why is this okay when we all represent the companies and the government agencies that actively promote or benignly support unhealthy practices? Why can’t we all, in some small way, redirect the conversation our clients have with their constituencies so that rationalization becomes more familiar. Why can’t we all move toward sensible solutions that are phased in over time — like gradually reducing salt and sugar in prepared and processed foods — so that business strategies are protected as much as, but not more than, health.

The answer is, we can. If we can be satisfied with rewards that include better infant mortality, longer life, and fewer chronic diseases, we might be able to redirect the goals of healthcare and reduce the political tension. If we are focused on market share, competitive advantage, directing super PACs and wielding power, we won’t.

Louis Tharp is CEO of TGI Healthworks in Upper Nyack, New York.
**FEATURE**

**Targeting patients in a post "blockbuster" drug world**

By Diana Littman Paige

A woman’s 88-year-old father has begun to lose his eyesight. His ophthalmologist says there’s a new surgical option but it involves months of rehabilitation therapy. Should she broach it with her father or is he too set in his ways to cope with such a big change? She’s not sure where to turn for help and support as this is such a new advancement.

A mother’s young daughter has a rare, but severe type of epilepsy. The five-year-old suffers from multiple seizures daily and her behavior has started to become erratic. The information she finds online says little more than that the disease is severe and hard to manage. She is desperate to learn about anything she can to ease her daughter’s symptoms and make her feel less helpless.

These patient situations represent the new challenges the healthcare communications industry will deal with as pharmaceutical pipelines fill with drugs for smaller patient populations and even smaller patient support resources. Eight of the 10 top-selling blockbuster drugs for the major primary care disorders like diabetes, heart disease and asthma have lost their exclusivity, or will by 2016, and many of the drugs launched in the next few years will be for niche diseases.

Communications for niche diseases are distinctly different from those for broad-based primary care disorders, where every type of educational or support program has probably already been done. Several times. For general and multicultural populations. For niche diseases, which often lack drugs approved specifically for their treatment, it’s not always easy for patients to find more than the rudimentary information about the disease and coping with symptoms. In some cases, these diseases are so rare that there are few reliable resources at all.

The effects of these diseases can be devastating for patients and their caregivers. In addition to feeling hopeless, patients and caregivers can be burdened with financial issues and a diminished quality of life. Parents of sick children suffer from guilt and feelings of helplessness. Tim Cote, the former head of the FDA’s Orphan Products Development program, recently said, “There is no force in nature stronger than a mother with a sick child. She’ll do anything and go to great lengths and bridge any chasm to figure out how to get things moving.” Many patients or caregivers who have dealt with the disease for a long time are highly informed, devouring not only patient information but also in vitro and clinical research reports in professional publications. They are a tight-knit community that is tuned into the influencers on their disease, including patient organizations and advocates, online influencers and academic researchers.

A joint study between the Pew Internet and American Life Project and the California HealthCare Foundation found that one in five Internet users go online seeking others with similar health concerns. And after receiving a diagnosis, especially for rare diseases, an increasing number of people turn to the web for support and information to become more engaged in their care.

There’s a good chance these communities will be highly interested in — yet highly skeptical about — what a pharmaceutical company can do to help them. The public relations profession is ideally suited to take on these new communications challenges. Our ability to micro target patients, translate complicated science into “consumer speak,” build strong relationships and mobilize advocates are the types of indispensable skills required to effectively reach and educate patients, raise awareness about treatments and foster authentic relationships with pharmaceutical and biotech companies.

Below are some of the essentials for supporting brand marketing goals while meeting the specialized needs of these patient populations:

- **Understand your audience:** In addition to the general target insights discussed above, each patient group has characteristics specific to their disease. You may need to communicate only to the patient, only to the caregiver, or have different strategies for both audiences. Understand their language, the nuances of their particular disorders, how patients, caregivers and HCPs interacts and use this knowledge to develop meaningful and relatable education and support programs that help patients (and caregivers) live better lives, not just learn about a new therapy.
- **Build relationships early — and often:** Relationships with patient advocacy groups could be the key to reaching these very hard to find patients. These organizations also can yield valuable insight into the perspective and unmet needs of patients, which will prove invaluable as you develop pre- and post-marketing communications programs. Start early in the drug development process. It takes time to develop mutual trust. And ensure you communicate consistently whenever there is relevant news.

If there are a number of groups that serve target patients, consider helping them pool resources so they can be more effective in reaching their constituents or achieving an education or public policy objective. These “groups” may be two parents with a computer vs. the typical broad based and well funded national organizations like the American Heart Association or American Diabetes Association and can benefit from our experience in coalition building and sensitivity to each groups’ individual needs.

- **Reconsider traditional communications paradigms:** When it comes to communicating about drug research or approval or even disease information, think carefully about strategies that achieve the best ROI. Coverage on the “Today Show” and in national newspapers and magazines is a gold standard for many campaigns, but it may not be the most cost effective way to reach smaller populations. National coverage has its place of course, but there’s a lot of power in delivering news directly to a more engaged audience.

The Internet and especially social media are ideally suited to communicating with a small community of patients who are often spread out across the country. How you decide to engage online will depend a lot on whether you provide disease awareness or brand information, subject to FDA regulations.

The more effective you are at getting inside the heads and hearts of this community and understanding their needs, the more effective your programs will be. And, perhaps best of all, you’ll make a meaningful difference in lives of patients and caregivers.

Diana Littman Paige is EVP of MMC Health & Well-Being.
Gov. site helps consumers find insurance

By Christine O’Dwyer

Created under the Affordable Care Act, HealthCare.gov is designed to help consumers learn about the new Act and its implications, as well as provide information on insurance choices available in all 50 states and the District of Columbia. The site is managed by the Department of Health & Human Services.

The site is updated daily and includes information on insurance providers, education materials on the healthcare law itself, and has a prevention and wellness section. The site also includes videos, a blog and a section for frequently asked questions. The site is also on Facebook, Twitter and YouTube. Visitors can sign up for e-mail updates.

A “newsroom” section features daily press releases and an archive of information regarding the new healthcare law. Naturally, because it’s an official government site, it’s limited to information about the law itself and does not address the Supreme Court decision, opposition to the law or its myriad detractors.

Since implementation of the law is moving forward, one of the key features of the site is the “timeline” section, which includes dates on when features of the law go into effect. All Americans will be required to have health insurance by January 1, 2014.

The site can help consumers to learn everything they can about their health insurance. The key feature is the “Exploring your coverage & pricing options” section. This is for those seeking individual insurance, not covered by their employer. Here you choose your state and it takes your through prompts to help you shop for coverage in your area. It asks a few questions, such as date of birth, when you want coverage to begin and more, then the plans are listed. You can narrow down the search by out-of-pocket limit, annual deductible, monthly rate, type of plan and more. The prices listed are estimates and are subject to change based on the application process.

Because the site only lists plans submitted by insurers, it is not a comprehensive list of insurers and plans. For instance, a search for Virginia plans yielded a variety of results, but did not include all plans offered in the area. Consumers would still need to do additional research when shopping for a plan, including checking plans in their area and researching plans that their doctors already accept.

For individuals searching for insurance or for companies preparing for the requirements of the Affordable Care Act, HealthCare.gov provides a starting ground for understanding the new law.
Healthcare PR: a career choice for the ages

If you’re looking for a job where you’re never bored, you might want to look into healthcare PR.

By Brad Dodge

For some 30 years I’ve been trekking the field and I can honestly say just about every day there’s some new discovery or technological advancement or change in policy that will have you catching your breath or scratching your head — and sometimes both at the same time.

Healthcare technology is a booming industry. It is the wizard behind the curtain of every patient encounter, every surgical procedure, every transmitted image and claim, every tracked prescription, lab result and catheter change. And any company operating in the U.S. healthcare space as an innovator will need someone like us in PR to help them navigate their way. Why? Because there is clearly a wide gap between those who are innovating and those who need to understand the device’s practical applications. I’ve seen the glazed expressions up close and personal. Technologists are always way ahead of everyone — visionary, brilliant but frequently cut off from their market, not to mention the mother tongue.

Since starting Dodge Communications 11 years ago, my team and I have been working to bridge the gap for more than 75 organizations that sell products and services to the healthcare industry. We’ve been growing at a rate of 25 percent over the past few years and, unless the Mayan calendar is right, will continue to do so for the foreseeable future. Fingers crossed.

So if you’re pondering your next professional move, I’ve put together a list of Top 5 reasons you should think about a career in healthcare PR:

You’re a hero to your kids

When you work in PR, you get a lot of free stuff to take home to the kids. Clients show their appreciation by giving small gifts to pass out — pens, coffee mugs, toothbrushes, pill-a-day trays and stuffed toys that quack and snort and are excellent to toss around during staff meetings. It’s harmless fun and absolutely the stuff of good relationships. It reminds you of why you get up in the morning — because the people who make you work harder than you want to are also very thankful for the thought leadership articles you pitched and placed in trade magazines, for that proposal that got them into this year’s HIMSS conference and for the website refresh that increased user engagement and drove traffic to a new product offering. And at the end of the day, your kid will love the Snoopy plushy and the story of how it found its way into your hands.

You gain membership to a secret society

Unlike the world of consumer goods and services, the world of healthcare PR is small and manageable. And with a focus on technology, well, it’s a little like seeing how many people you can fit into a Volkswagen. In a niche market, every person in the office becomes an expert at what they do. You know the field and the players, who your clients’ top competitors are and what buyers want — without having to spend hundreds of hours on test marketing. Organizationally, there are fewer layers of bureaucracy, which lends itself to clarity of purpose, direct communication and a nimble approach to business that allows teams to quickly respond to clients and turnaround projects in less time.

You can switch political parties without losing friends

Healthcare is something of a hornet’s nest right now. The industry is rife with issues for pundits and politicos to sort through — cloud storage and privacy concerns, privatizing Medicare, rationing care services, ACA, CMS, ACOs and just about any other acronym you can think of. In this business, you get to explore the ramifications of reform and the impact of healthcare IT from both sides of the aisle. You have permission to kick that nest.

You’re the guy with the best stories at dinner parties

Healthcare reform is complex. It takes time, patience and a certain gritty determination to understand how the pieces fit together — not something most folks have time for at the end of the work day or between their kids’ soccer matches. But if you work in this industry, putting it together is what you do, a kind of public service that gets communicated to the consumer. You’ll find yourself explaining how
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Seven strategies for peace during times of crisis

By Jim Lukaszewski

Wherever there is conflict, confrontation and crisis, there is contention. In today’s Twitter, Blogger and bloviator-dominated world, working to resolve important issues, questions and decisions often begins very contentiously and ends only after one side is beaten and leaves the field; there is a mutual withdrawal, or most commonly, one side wins and the other side stays angry.

Winning, it turns out is never about getting 51% of individuals or groups to concur or comply; it’s getting 51% of those who matter. This thinking leads to an axiom and a law.

Lukaszewski’s first axiom of winning in contentious situations: Almost every decision of any consequence is made despite serious, often powerful collateral contentiousness. The media can be mad, or support someone else, some of your neighbors can be irritated, even your employees can be against you, but stay the course, be constructive in your approach and you can win.

Lukaszewski’s law of success and survival: Neither the media, your severest critic, angry neighbors, irritated legislators, nor regulators can truly stop what you have set out to accomplish. The most significant damage is almost always caused by the intervention, timidity, or hesitation of an overoptimistic boss or board, well-meaning friends, “supporters,” or relatives, and failure to address the issues raised by those who feel victimized by the process.

These seven principles are the components of a strategic approach for winning:

1. Wage peace every day. Reduce the production of critics, enemies and victims at every opportunity. Talk tough, act tough, or threaten and you will have war for sure. War produces casualties, victims, and new critics, all of whom will live long enough to destroy, delay, or stop your best efforts.

2. Reduce contention. Contention is the absence of agreement. Work for agreement, incrementally, every day. Stop causing contention.

3. Seek permission rather than entitlement. Getting permission depends upon gaining public agreement and consent. Avoid and resist anything, anyone, or any decision, that delays, denies, discredits, or damages the permission process. Act like you’re entitled to a public decision and you’ll really be stopped cold.

4. Control testosterosis. Anger, irritation, frustration, and confrontation cloud judgment, damage relationships, cause misunderstandings, create critics, naysayers and rarely accomplish anything good. Stop taking contrary views and negative messages personally. The only one who is suffering from this is you. No one else cares. Remain calm and carry on.

5. Be democratic. Recognize and leverage from the patterns of democracy, avoid political games and game players, all those people have their own agendas. They will dump you in a minute.

6. Work as directly as you can: Like most everything that matters in life, agreement is generally achieved, when the principals commit to sit down face-to-face and directly work out their differences. Engagement builds stakeholder support, and reduces the production of critics.

7. Communicate intentionally. Success depends on simple, sensible, positive, declarative and constructive communication, common sense, direct, prompt action, empathy, transparency, and engagement. Explain to everyone as well as remind them of your communication and behavior intentions so they will know what to expect and how to behave in return.

Over the 30 years I’ve been helping clients get public permission, communities, critics, individuals and organized opposition have consistently grown more powerful in their ability to stop or significantly alter the plans of even the most worthy projects and powerful companies. With “social media” the power of individual opposers will continue to grow.

I’ve also learned that you can often achieve your objectives with people being upset, the media angry, your employees split, and in communities that may be more divided than unified.

Winning depends on altitude (keeping calm) and attitude:

1. Candor. Public trust depends on receiving information well ahead of their actual need for it. The most toxic strategy is to fail to answer every question, provide key information after it is truly needed, or work to disparage, demean, or discredit those who oppose or have concerns about the project, and go to the trouble of making them public.

2. Patience: Accomplishing your goals is going to take longer than ever imagined, even to achieve interim milestones.

3. Resources: Success will defy financial management. More money will be spent for things one never imagined would happen, or be requested or required.

4. Stomach Power: Set your stomach for all the lies, misunderstandings, deceptions, bad behaviors and misrepresentations created by angry, frightened, and unqualified people with real power, combined with a willing media, and the outrageous motives they will ascribe to you, with all of your explanations, good work and intentions just bouncing off.

5. Staying Power: Community decision-making is slow, sometimes silly, even stupid, sloppy, expensive, confusing, and emotionally driven. Settle back and go with the flow. Kick up, kick out, and you’ll go nowhere pretty quickly.

6. Pragmatism: Winning means constantly waging peace and re-acquiring community consent daily. It means relentlessly doing the doable, knowing the knowable, getting the getable, and achieving the achievable.

If democracy is one thing, it is a process. Those who propose, if they can stay the course, can expect to achieve less than they had hoped, sometimes far less, but usually wind up with more than they need to successfully achieve their objectives, which are likely to change as the community has its say. If you believe that you are entitled to get what you are asking for, you are entitled only to disappointment.

Your goal is to help work preemptively, constructively, and productively to shorten the timelines and lower the barriers that are inevitable byproducts of public decision making. Wage peace and win earlier, if winning is possible at all.

James E. Lukaszewski is President of the Lukaszewski Group Division at Risdall Public Relations in St. Paul, MN.
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Our healthcare team builds connections, shapes public policy and creates campaigns that make a difference for patients and reputations for life sciences and providers. From winning epic battles in Congress to managing reputations for life sciences and other providers in local communities, we know healthcare like few firms do. We’ve positioned our healthcare clients to be more proactive — staving off attacks from the media and competitors, helping them build relationships with target audiences and ensuring they had a voice to influence public policy. Our team has worked across the spectrum of healthcare sectors on every issue over the past 15 years including Medicare, Medicaid, the uninsured and health information technology. We understand that accomplishing your goals depends on a combination of public policy development, branding and messaging, coalition building, patient advocacy, issues management and consumer education. Our healthcare clients include publicly traded companies, national and state associations and nonprofits.

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Julie Batliner, Managing Director
Erika Collins, Director of New Business

Carmichael Lynch Spong’s Living Well team members offer a broad range of expertise representing products, services and organizations that better people’s lives. We bring a broad perspective to an organization with experience working for nutraceutical manufacturers, healthcare providers and insurers, community-benefit organizations all the way to pharmaceutical companies. We understand the importance of taking complex information and distilling it to what really matters to our clients’ audience. Whether it’s customers, sales force, health care providers, registered dietitians, or regulatory agencies.

We reach stakeholders’ minds and hearts with our clients’ messages by communicating a story that highlights scientific innovations, while capturing the rational and emotional reasons to believe in a brand. We ensure our clients are trusted leaders in their fields for both consumer, professional and customer audiences, and we tailor our approaches for these key targets. By delivering simple and direct calls to action, we see results manifest as sustainable changes in behavior.

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Chamberlain Healthcare Public Relations exclusively serves the global healthcare sector. Our team is passionate about translating science into messages that empower and inspire people to make meaningful decisions about their health. We offer a suite of communications services, including brand communications, corporate communications, media relations, advocacy relations, digital strategy, data communications, message and content development, and issues management. Founded in 1993, Chamberlain has longstanding relationships with pharmaceutical companies, biotech companies, patient and professional groups, and the healthcare media that cover them.

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Sherri Michelstein, President, Alembic Health Communications

Cooney/Waters Group, ranked among the top health care agencies in the U.S., is a group of companies focused exclusively on health and science across many therapeutic areas and health sectors in North America and internationally. With more than 75 professionals in its new NYC headquarters office, the Group includes three sister companies: Cooney/Waters (cooneywaters.com) now in its 20th year providing the full range of public relations and public affairs award-winning services to healthcare, pharmaceutical and biotechnology enterprises; Alembic Health Comms. (alembichealth.com) specializing in communications programs in the area of health advocacy; The Corkery Group (thecorkerygroup.com) an internationally recognized full-service firm with expertise in delivering focused issues-oriented communications for some of the world’s leading public and private health organizations.

To help health care industry clients reach the more than 50.5 million Hispanics living in the U.S. Cooney/Waters recently launched Cultur Health (www.culturhealth.com) a new Hispanic health care communications service. Cultur Health leverages cultural insights and healthcare communications expertise to help drive important healthcare messages to Latinos. For clients such as sanofi-pasteur and UCB, Inc. the company has developed multiple award-winning national, regional and grassroots programs to reach Hispanics who are at greater risk for many treatable diseases.

Cooney/Waters is a founding member of The Health Collective Network (thehealthcollectivenetwork.com), a multi-national specialist consultancy dedicated to developing and managing healthcare communication programs across international markets with global and local connections and expertise.

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Recent experience includes: The Physicians Foundation, a nonprofit organization advancing the work of practicing physicians; AHIMA (American Health Information Management Association); Capgemini Health (acquired by Accenture), a leading consultant to healthcare organizations; Noblis Center for Health Innovation, a non-profit group providing strategic thinking for health organization’s planning and performance; U.S. Preventive Medicine, a company working to advance the nation’s focus on prevention; and Queens Vanguard Center of the National Children’s Study, a federal research project on child health. CooperKatz offers a portfolio of capabilities that include brand development, communications strategy, program development, media relations, social media engagement and creative services. The firm’s resources also include designing/producing meetings, events, business presentations, video/multi-media elements and collateral materials.

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Coyne PR is one of the leading independent full-service public relations firms in the country, representing an impressive collection of international corporations, top national brands, high profile events and first-class organizations. Named 2011 Small Agency of the Year (The Holmes Report), and a winner of a 2009 Silver Anvil Award for its work in the health care sector, no agency possesses a better combination of unbridled creativity, limitless enthusiasm, strategic approach, and impeccable integrity and client service than our nationally recognized firm. The agency’s award-winning health practice, Coyne Health, represents clients across three key pillars of the health care landscape — health and wellness, medical and scientific, and advocacy and cause. With its unique strategic planning model, ActivationHealth, Coyne Health goes beyond awareness and focuses on activating brand stakeholders to drive outcomes. The practice combines deep expertise and insights in emerging medical science, a wide range of therapeutic categories, healthcare IT innovation and payor and provider landscape with Coyne’s core creative DNA and the agency’s award winning digital practice to deliver truly breakthrough ideas.

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Raymond Crosby, President
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Healthcare Practice

For more than 35 years, Crosby has helped healthcare clients Inspire Actions That Matter™ — actions that positively impact people’s lives and make a real difference for individuals, families, communities and society.

The firm’s Healthcare Practice serves hospitals and health systems, health plans, physician groups, technology and service providers, seniors housing, health advocacy groups and government agencies.

Services include marketing research and planning, brand development, integrated communications programs, public relations, community and multicultural outreach, online marketing, PSAs, and social marketing and behavior change campaigns.

Crosby ranks among the top agencies in the Mid-Atlantic region. Clients include Kaiser Permanente, Saint Agnes Hospital, Ameritox, Agency for Healthcare Research and Quality (AHRQ), Social Security Administration, Veterans Health Administration (VHA), Health Resources and Services Administration (HRSA), and the National Investment Center for Seniors Housing & Care Industry. Headquartered in Annapolis, Md., Crosby also has offices in Washington, D.C.

EXPONENT PR

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www.expONENTpr.com

Tom Lindell, Managing Director

ExpONENT PR is a fast-growing public relations agency based in Minneapolis, Minn. The agency has developed a dynamic, modern approach to PR — one that infuses creativity and leverages the power of digital and social media to create believers in a brand.

ExpONENT PR has an impressive track record with a range of leading healthcare organizations, including pharmaceutical companies, medical device manufacturers and not-for-profit health care associations. Clients include Medtronic Foundation, Novartis, Starkey Hearing Technologies and IBA Particle Therapy.

ExpONENT PR’s understanding of this complex industry ensures that clients have visibility and a strong voice in the fast-moving marketplace. The agency has shaped professional relations programs, designed public awareness campaigns and counseled clients through crisis situations.

ExpONENT PR is a division of Colle+McVoy, which is owned by MDC Partners (NASDAQ: MDCA).
Finn Partners
HEALTH

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www.finnpartners.com

Miriam Weber Miller, Practice Head

Finn Partners leverages expertise and experience across a wide range of HC sectors, including consumer health, health policy and public affairs, health services, non-profit and health information technology. The organization also has a growing focus on the life sciences and specialty pharma industries, with particular emphasis on helping clients navigate the world of investor and corporate communications.

Our approach to serving all of these sectors is a deep understanding of the unique and challenging needs of each, combined with a unified approach to strategic planning, media relations and digital visibility. This ensures that both the company and its place in the healthcare paradigm are well-positioned for business success.

At the account level, this philosophy has translated into broad-based programs with a range of state and local agencies, hospitals, provider and other for- and non-profit health organizations. We deal with issues that have real impact on people’s lives and our programs have real impact for our clients among all of their target audiences.

Tactically, we have led significant capital campaigns—creating key messages for potential donors, fashioning them into targeted video and printed materi- als, and building the most effective media and digital strategies to support broad-based distribution, penetration and success. We educate and empower consumers about crucial health insurance decisions. We ensure that our clients’ messages and actions impact the audiences that matter to them.

We realize that the issues we tackle are important not only to our clients, but to consumers — as healthcare touches every person in many ways. For us, this means that doing our job well means people live better lives. This is a responsibility we work hard to earn — and keep — every day.

Clients in the health arena include the American Association of Orthodontists, Long Beach Memorial Center, the American Kidney Fund, the Pediatric Respiratory Health Institute, Los Angeles County Department of Health and Pelican Biopharma.

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FrenchWestVaughan (FWV) is the Southeast’s leading public relations, public affairs and brand communications agency, independent or otherwise. Founded in April 1997 in Raleigh, N.C. by agency Chairman & CEO Rick French, FWV now employs 70 public relations, advertising and digital marketing experts among its offices in New York City, Tampa, Dallas and Los Angeles.

Ranking the #24 firm for healthcare PR by O’Dwyer’s, FWV’s category experience includes work on behalf of private and clinical practices, research labs, health IT companies, laboratory and medical device manufacturers, drug development firms, weight loss centers and large pharmaceutical manufacturers.

FWV specializes in helping its healthcare clients increase brand awareness among key decision makers for their product lines and services through targeted media outreach, advocacy marketing campaigns, public affairs, special events, trade show support, emerging media applications and crisis communications.

FWV’s present and past healthcare clients include The Jimmy V Foundation for Cancer Research (JVF), O2 Fitness, Pfizer, GlaxoSmithKline, Isagenix, New Hope Fertility Center, bioMérieux, Structure House, Wellspring, University of North Carolina Institute for Pharmacogenomics and Individualized Therapy, A4 Health Systems, Cardinal Health, CeNeRx, Foresight, MDeverywhere, Mederiyption, Pulmonary & Respiratory (Prilosec), Southtech, Sterling Healthcare and WakeMed.

In addition to its portfolio of healthcare clients, FWV works with many of the world’s leading companies and brands, including global power and automation technology leader ABB, SAS, RBC Bank, Melitta Coffee, Moe’s Southwest Grill restaurants, spirits company Hood River Distillery (Pendleton Whisky, Pendleton 1910, Yazi Ginger Vodka, Broker’s Gin and SinFire Cinnamon Whisky) and the U.S. Polo Association. The agency’s fully integrated creative and digital team provides award-winning advertising, graphic design and digital and social media services for a wide range of clients.

GCI HEALTH

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GCI Health is an award winning, forward-thinking healthcare public relations agency powered by best-in-the-business professionals.

WPP’s only specialty health public relations agency, GCI Health was named Healthcare Agency of the Year by The Holmes Report in 2011 and continues to garner industry accolades, as shown by back-to-back SABRE wins in the Pharmaceutical Campaign of the Year category in 2011 and 2012.

With offices in New York, Atlanta, Los Angeles, San Francisco, Boston, Chicago, Toronto and the U.K., GCI Health offers clients an accessible senior level leadership team, A-to-Z healthcare experience, a commitment to “beating” client expectations, and an obsession with anticipating the challenges of an increasingly complex and transforming healthcare communications environment. With insider’s knowledge of health media, high science, digital health strategy, consumer activation, crisis management, patient advocacy and health education, GCI Health’s focus on delivering results is unrelenting.

GOODMAN MEDIA INTERNATIONAL, INC.

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Tom Goodman, Founder and CEO
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Goodman Media International, Inc. is a leading public relations firm specializing in media relations (traditional, digital, and social media) for major corporations and nonprofit organizations and has extensive experience in healthcare. We represent major healthcare providers, leaders in healthcare improvement, healthcare-related foundations, and product manufacturers.

We raise the visibility of our clients through the media, design and implement award-winning communications campaigns, orchestrate advocacy initiatives, elevate thought-leadership, promote research, and manage event promotion. Our clients include, among others, Hospital for Special Surgery, Institute for Healthcare Improvement, Intermountain Healthcare, Lustgarten Foundation (for pancreatic cancer research), Spectrum Health, and initiatives such as Common Good’s campaign for the creation of specialized health courts.

Goodman Media was founded in 1996 by Tom Goodman, former head of communications for CBS Inc. and, earlier, CBS News.
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DEAR FRIENDS OF FINN PARTNERS:

When we started Finn Partners last December, we said we would be defined by collaboration. A year later, that collaborative approach defines who we are and what we do, and energizes our commitment to our client partners and to each other. Step off the elevator at the newly renovated reception area in our New York headquarters and that commitment springs to life in a dynamic video wall of images that illustrates the power of collaboration in the arts, in the sciences and in business.

Collaboration is at the core of our brand, and it’s helped us achieve some powerful results. In less than 12 months we have become one of the brightest stories in the PR business. Our 2011 US fees rank us as one of the top ten independent agencies — in 2012 we will achieve more than 30 percent growth (far above the growth rate of the PR industry) and have been named new agency of the year by a leading trade publication. And while our name is new, we have a deeply rooted team. Our 30 Managing Partners, Senior Partners and Partners have worked together for an average of 10 years, and have a shared commitment to our mission and our future.

We are an agency of commitments. While we prize new business, we hold the importance of existing client relationships above all else.

And, we care about every one of our colleagues. Our first Finn Partners ad last year proudly displayed the names of the 180 people who work in our six offices. One year later, our staff has grown to over 220, with a host of talented newcomers joining that original roster. Finn Partners is leading the industry with a very low turnover rate.

Finally, as we look to the future, we want to be an agency that makes a difference — through our award winning pro-bono work for numerous not-for-profit organizations, through the global peace work of my sister, Dena Merriam, who has joined me in launching Finn Partners, and through some of my own foundation work supporting the arts. Most of all we want to make a difference in the lives of the people who work here and, through business, in the lives of the clients we serve.

If you would like to know more, please contact me at peter@finnpartners.com or at my direct line, which is 212-593-6428.

Best wishes,

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healthcare reform and personalized
medicine to mHealth, ICD-10 and
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disciplined teams keep a 24/7 watch. The media
team, comprised entirely of former
journalists and editors, does noth-
ing but engage media. Meanwhile,
the social media team is listening
to the voice of the customer, help-
ing set and reset content strategies
and identifying opportunities for
maximizing insights across the
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collateral development to video
production, digital marketing and
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Susan Levine, Senior Counselor
GYMR is a Washington, D.C.
based public relations agency
that provides health/healthcare
clients with strategic communi-
cations that capitalize on the
dynamics unique to Washington.
GYMR’s unique strength is the
background of its team - govern-
ment, advocacy, associations,
foundations, corporations and
nonprofit organizations - who
execute strategies that include
image and alliance building, pub-
lic education campaigns or media
relations to harness the forma-

tive forces of Washington and
produce successful results for
clients. The agency has coun-
seled a wide range of clients,
including trade associations,
health voluntary organizations,
collisions, foundations, corpora-
tions, federal and state agencies
and nonprofit groups.
Partial Client List: Advamed,
American Academy of Family
Physicians, American Board of
Internal Medicine, American
Psychiatric Association,
American College of
Neuropsychopharmacology,
Avalere Health, Banner
Alzheimer’s Institute, Bravewell
Collaborative, Campaign For
Tobacco-Free Kids, Digestive
Disease Week, Health Affairs,
National Institutes of Health,
Research!America, Robert Wood
Johnson Foundation, Society for
Healthcare Epidemiology of
America, The Gordon and Betty
Moore Foundation, The Vision
Council, and University of
California at San Diego (ADNI).

HAGER SHARP
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Fax: 202/842-4032
www.hagersharp.com
Garry Curtis, President & CEO
Celebrating 39 years, Hager
Sharp Inc. provides communica-
tions and public relations services
to clients who want to make a dif-
ference in health communica-
tions. Firmly rooted in social mar-
keting and behavior change theo-
ry, Hager Sharp is a leader in
national health and public infor-
mation programs. Hager Sharp, an
employee-owned firm, delivers
highly personal service and cre-
ativity in strategic planning,
design and implementation of
award-winning national health
media campaigns, often concen-
trating on multicultural outreach.
We are partners with our clients in
a full-circle approach to changing
behaviors so people can lead
healthier lives.

Current health clients include:
National Institute of Diabetes
and Digestive and Kidney Diseases
(NIDDK); Office on Women’s
Health; Annie E. Casey
Foundation’s KIDS COUNT;
President’s Cancer Panel; ALS
Association; Pharmacy
Technician Certification Board;
and Centers for Disease Control
and Prevention.

These health campaigns
include a full range of communica-
tions support comprising audi-
ence research, message develop-
ment, engaging partners, produc-
ting targeted materials for health-
care professionals, the media
and the public — especially at-risk
audiences; generating media
attention and creating community
networks.
itics and communications to win their strategic goals during times of challenge or change.

With offices in Nashville and Chicago, our team of former political operatives, journalists and healthcare marketers develops and manages successful campaigns for hospitals and health systems throughout the United States. We help them navigate high stakes issues such as: organizational restructuring; mergers and acquisitions; crisis management; reputation management; re-engineering of communications & marketing departments; and re-positioning of companies, hospitals and service lines in new and existing markets.

We understand the complex pressures that drive the industry, and bring the intensity, intelligence and discipline – the cornerstones of every good political campaign – to the healthcare arena.

JFK Communications, Inc. is an innovative provider of creative communications solutions for the life sciences and healthcare industry. 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.

Our extensive industry experience along with our world-class command of media relations 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.

Also visit our sister company, BioCore Medical Communications. (www.biocoremccommms.com).

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www.facebook.com/JPAhealthcare

Carrie Jones, Principal & Managing Director
Ken Deutsch, Executive Vice President
Valerie Carter, Sr. Vice President
Berna Diehl, Sr. Vice President

JPA is an award-winning health communications firm known for crafting targeted, high-impact programs for non-profit, pharmaceutical and government clients. By applying our influencer relations model, JPA identifies and engages stakeholders that can be leveraged to most effectively deliver our clients’ messages to key audiences.

JPA has cultivated a seasoned team specializing in medical and science communications. As the fastest-growing health communications company in the United States, our commitment to providing the highest quality services to our clients is at the core of JPA’s continued success. Not only do we treat every aspect of our clients’ business as if we do our own, we partner with our clients during every stage of a campaign to ensure measurable results.


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www.KLCP.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 counseling 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 health care clients since 1985. Together, we will strengthen your voice in the marketplace.

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Jeffrey T. Lambert, President
Don Hunt, Managing Director,
Health Care Practice

Named the 2010 PRWeek Small Agency of the Year, Lambert, Edwards & Associates (www.lambert-edwards.com) is a top-10 Midwest-based PR firm and a top-20 investor relations firm nationally with clients based in 20 states and five countries. As Michigan’s only statewide firm, LE&A serves middle-market companies and national brands in five practice areas: Health Care, Automotive, Consumer, Financial Communications and Public Affairs. LE&A has posted 12 consecutive years of growth, been listed on the Inc. 5000 Fastest Growing Companies in America for four straight years, earned four Silver Anvil awards, and won 2011 Bulldog Best Integration of PR and IR and 2012 Bulldog Best New Product Launch.

LE&A’s Health Care Practice spans large-scale, integrated campaigns to specialized projects and new product and milestone announcements for all levels of organizations in the health care arena — from pharmaceutical manufacturers and marketers to hospital and insurers, medical device makers, biotech companies and drug developers. LE&A has assembled a team from corporate, global agency and Wall Street backgrounds that have been on the front lines and on the inside, working in sync with the C-suite, sales and marketing, legal, HR and regulatory.

We provide full-service communications ranging from strategic corporate positioning and brand development/awareness to professional education campaigns and media relations, including national, regional, local, trade outreach and social media strategy/online engagement programs. Most importantly, LE&A’s award-winning programs yield tangible results that help clients achieve their business objectives and support improved industry awareness.

LABRECHE
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www.labreche.com

LaBreche is an award-winning unified marketing agency. We believe in unified marketing where channels are tied together for greater impact, and closely tied to your lead nurtur-
Makovsky Health is a leading communications agency for the healthcare industry with expertise and deep knowledge across a range from consumer health to ultra-healthcare industry with expertise, content creators, channel specialists and technologists who all know how to discover, develop and collaborate around health care marketing innovation.

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

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

Marina Maher, President Diana Litman Paige, EVP/Health & Well-Being Practice Director Debra Ojaynor, Chief Business Strategist Michele Schimmel, Managing Director Julian Fleming, Managing Director Kelly Cacioppo, Group SVP Jennifer Tepper, Group SVP Christina Corso, Group SVP

Marina Maher Communications (MMC) is celebrated for our creativity. We create award-winning campaigns that motivate consumers and patients to take action and drive business results. Our work has consistently been recognized by clients and the industry with awards for client campaigns and for the agency itself. In 2012 the agency was named Healthcare Agency of the Year by The Holmes Report — an achievement of which we are enormously proud.

MMC’s deep knowledge of consumers gives MMC Health & Well-Being a creative edge over traditional healthcare and health public relations agencies. While we represent many products targeted to both men and women, MMC specializes in marketing to women as the Chief Medical Officer for themselves and their families.

MMC Health & Well-Being helps health and medical brands build emotional connections with consumers through a strategic approach that blends consumer understanding with a deep edge of science. We make medicine and science relevant to patients, physicians and other healthcare influencers by bringing together the best of two key disciplines: expertise in consumer marketing and grounding in scientific and industry knowledge.

We create breakthrough health public relations programs for Rx and OTC medicines, devices and diagnostics that mobilize brand advocates through traditional and social media, DTC events, key influencers and innovative partnerships. MMC’s focus on employee support and development is frequently recognized by the industry. In 2012 the agency was named one of the “Best Places to Work” by AdAge.

In November 2011, MMC joined the Omnicom network. We can now service business on a global basis and provide clients with seamless access to 360-degree global marketing services.

**MARX LAYNE & COMPANY**

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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 seniors, 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 adversity communications.

**MCS HEALTHCARE PUBLIC RELATIONS**

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

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

Creativity. Service. Results. For more than 25 years, MCS Healthcare Public Relations has focused solely on healthcare. Because our industry is always evolving, we’re constantly adapting. From communicating the in-depth science behind groundbreaking therapies, to supporting advocacy groups and other organizations making a difference, we are in step with the issues and trends that impact the practice and delivery of medicine throughout the world.

MCS, through a well-established network of independent public relations agencies, operates in Canada and most Western and Eastern European countries. With experience in virtually every therapeutic category, we provide our clients with a multitude of services, including product and corporate communications, issues management and crisis communication, media relations and media training, advocacy relations, business-to-business PR, and social media counsel.

Current clients include Merck, Genentech (Roche), Becton Dickinson, CSL Behring, Daiichi Sankyo Co. Ltd., MannKind Corporation, Qorixa, PDR Network, Pernix Therapeutics, ParaPRO, LLC and the Head & Neck Cancer Alliance. For more information visit www.mcspcr.com or follow us on Twitter @MCSHealthcarePR

**OGILVY PUBLIC RELATIONS**

636 11th Avenue New York, NY 10036 212/880-5360 kate.cronin@ogilvy.com www.ogilvypr.com

Kate Cronin, Managing Director, Global Healthcare

Ogilvy PR is a recognized trailblazer in communications, supporting clients in virtually every industry...
Our health care experience includes working closely with a major hospital system to effectively communicate community benefit initiatives to key opinion leaders and the general public, research community benefit impact, develop communications planning around community health assessment surveys, conduct market research, and support social media and digital efforts. OCG has also worked with a Medicare/Medicaid provider and a large multi-specialty physicians group.

We help health care providers tell their unique stories so that you can focus on what you do best — saving lives and making people better.

Partner in The Worldcom Public Relations Group
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www.pcipr.com

Dorothy Oliver Pirovano, CEO

With clients from advocacy organizations and medical and allied health associations to Fortune 100 corporations and startups; pharma, device manufacturers, biotechs and hospital suppliers; hospitals and health systems; retail; accrediting agencies; payers and consultants, PCI knows audiences first-hand. We understand what makes them tick and know the words that will resonate and prompt engagement.

For nearly all of our 50 years, PCI has had a concentration of healthcare clients; today it represents more than half of our business.

Healthcare is an international practice for us — 20+ national and international medical and dental associations; a growing network of cancer treatment centers; start-ups looking for visibility; university health systems. We launch products and manage lifecycle communications; run consumer awareness and screening programs on a turn-key basis; develop professional relations campaigns designed to draw referrals; create and manage social media platforms including efficient online newsrooms and content-rich websites.

More than 80% of our new business comes through referrals and personal recommendations from our clients; more than 50% of our healthcare clients have stayed with us five years or more (with a number topping 20 years).

Our staff knows healthcare — inside and out. Our clients benefit.

Pollock Communications sparks dialogue about constipation from medication with an oversized prescription drug bottle in Penn Station, as part of an integrated creative campaign to promote the benefits of Senokot laxatives.
ReviveHealth is a strategic communication firm specializing in Health Services, Health Technology, and Healthy Living. Our firm is the 11th largest health care PR firm in the country, representing hospitals and health systems, health technology companies, academic medical centers, physician organizations, and health & wellness companies nationwide. We are recognized for deep expertise in health care and, as such, for our ability to predict problems, protect reputations, and craft the right story to drive business growth.

We have developed special expertise in managing “life events” for health systems — payor contracting issues, cost cutting and performance improvement initiatives, clinical integration, crisis management, labor issues, mergers and acquisitions, new service lines or business strategies, and litigation support.

ReviveHealth is consistently recognized by PRWeek, Holmes Report, and O’Dwyer’s for creating strong agency culture, strategic excellence, and client results. We were named “New Agency of the Year” for 2009, “Fastest Growing PR Agency in America” in 2010, and “Best Agency to Work For” in both 2011 and 2012.

RF|BINDER

RF|Binder helps brands understand the drivers of consumer thinking and behavior, and craft the right story to drive business growth. RF|Binder helps brands understand the drivers of consumer thinking and behavior, and craft the right story to drive business growth. RF|Binder helps brands understand the drivers of consumer thinking and behavior, and craft the right story to drive business growth.

ROSICA COMMUNICATIONS

Rosica Communications has a well-earned reputation for delivering national results for its healthcare clients. Established in 1980, Rosica combines the resources and depth of talent of the world’s most recognizable, household brands by providing consumers with the information and resources needed to manage their lives.

RUDER FINN

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 Healthcare has extensive expertise in promoting and branding drugs across all therapeutic categories, from first-in-class specialty treatments to mass market consumer drugs. Ruder Finn specializes in launching new therapies and bringing new life to seasoned drugs in need of reinventing through media relations, thought leadership, consumer engagement, advocacy relations, online engagement and community building, marketing and public affairs. Ruder Finn Healthcare offers a truly integrated approach, as the agency embeds social media into all aspects of PR and has spearheaded the development of online advocacy and patient communities and assisted pharmaceutical clients in navigating the complexities associated with the current social media environment.

Ruder Finn Healthcare has deep relationships with advocacy organizations and regularly works to broker partnerships between associations and clients 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. Ruder Finn also has a demonstrated

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Continued from page 40

RUDER FINN

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.

Clients include Novartis, 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 NAPNAP.

SAM BROWN INC.

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www.sambrown.com
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Laura M. Liotta, President

Sam Brown Inc. is a leading independent, healthcare communications agency formed in 1999 on the principle that a new approach was needed to provide a higher level of Public Relations attention, service and value to the pharmaceutical and biotechnology industry.

Sam Brown Inc. is a unique, network-based agency with only senior-level, dedicated professionals running all accounts, supported by a large network of specialists. Client account teams are individually customized based on team expertise and the type of communications support required.

This entrepreneurial model creates a work environment that fosters very high team and client retention. Clients have enjoyed outstanding service from the same team year after year. Some current clients include AltHerx, Astellas, Celator, Ceptaris, DuPont, Enteromedics, GlaxoSmithKline, H3 Biosciences, Incyte, MEDA, Medivation, Tetraphase, Together Rx Access and Xenoport.

Sam Brown offers proven communications expertise, industry knowledge, and the right healthcare experience from discovery to launch, delivered with the highest service by a senior level team.

SOLOMON MCCOWN & COMPANY

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Twitter: @HealthBostonPR

Helene Solomon, CEO
Michael Regunberg, Senior Vice President

The healthcare industry is in the midst of monumental changes including state and national reform, cost reduction and large-scale HIT advances. Solomon McCown’s (SM&J) work with physician groups, hospitals, dental benefit providers, insurers, think-tanks, non-profits and advocacy groups has put us at the center of the national and statewide healthcare discussion.

Healthcare communications requires understanding, packaging and disseminating complex information to inform and motivate critical audiences including policy and opinion leaders, providers, media and the public.

SM&J has a proven track record of helping healthcare organizations carry out their missions through integrated communications programs, including message development, media and community relations, thought leadership, strategic partnerships, and issues management.


TGI HEALTHWORKS

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Il Nam Pak, Program Associate
Joey Wohlhieter, Marco Pretell-Vazquez, Persuasive Tech. Associates
Brett Wiggins, Tech. Analyst

Since 1999, TGI Healthworks has maintained a focus on national grassroots programs within the healthcare discipline that are designed to build and sustain communities of people with chronic diseases.

Community-based and on-line events are the primary communications vehicles.

Our pre- and post-launch traditional public relations support this outreach. Patient, caregiver, physician, advocacy, and elected official outreach components are tied to hard and soft metrics that include prescribing habits tracking, as well as net promoter scores, online conversation sentiment, blog viral and velocity measurements, and traditional attitude measurements.

Our programs are customized to the disease state, the market and the product, and include OTC, DTC and device indications.

We focus on individuals, and we achieve persistence, compliance and brand loyalty objectives with a 100 percent targeted audience that includes ethnic, cultural and national origin segmentation with in-language programs for patients, caregivers, physicians and national, state and local elected and appointed representatives.

These branded and unbranded, publicity-ready events provide robust material for news path activities that include feature stories, hard news, political and social news, and health and fitness stories. 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.
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Maryellen Royle, President (Philadelphia)
Scott Clark, CEO (London)

Tonic is where communications come to life. Whatever the challenge, Tonic Life Communications is dedicated to the pursuit of communications excellence in the areas of LifeScience (prescription medicines and devices) and LifeStyle (consumer health and wellbeing brands). Whether it is a breakthrough medicine, medical device, or consumer product, Tonic has the experience and insight to educate and engage key audiences that matter most.

Headquartered in Philadelphia (formerly Dorland Global Public Relations) and London, Tonic has global reach. Through our Hospworth Health family of specialized agencies, we reach an additional 30 countries, spanning more than 70 offices. If you are looking for an agency partner with a ‘can do’ attitude, you will feel right at home with Tonic.

TWIST MKTG

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Jennifer Gottlieb, Leader
Tracy Naden, Managing Director
Maura Bergen, Managing Director
Colin Foster, Group Director
Greg Reilly, Group Director

Twist is a fully integrated global communications company focused on creating highly customized and inspired solutions for our clients. As part of the W2O Group, Twist offers a comprehensive range of communications services while focusing on creative approaches and collaboration, enabling us to create truly personalized solutions for clients with a nimbleness to adapt as the world changes.

Twist proudly represents a diverse roster of clients spanning healthcare, beauty, wellness, and consumer industries with an innovative client service approach. Building integrated teams of business experts from diverse backgrounds and specialties empowers Twist to understand what our clients need before they know they need it. Twist’s seasoned professionals specialize in a full range of services including PR / communications, content development, research/analytics, engagement, social media, web development, and design / creative services.

For more information, please visit http://twistmktg.com.

WCG

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Jim Weiss, Chairman & CEO, W2O Group
Bob Pearson, President, W2O Group
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Craig Alperowitz, Practice Leader, Consumer
Leslie Wheeler, Practice Leader, Healthcare
Gail Cohen, Practice Leader, Global Healthcare

WCG is a global communications company offering integrated creative, interactive and marketing communications services to clients in healthcare, technology, consumer products and entertainment. As part of the W2O Group, WCG is creating the positive future of communications by focusing on the corporate, product marketing and communications needs of the world’s leading companies.

Established in 2001 by Jim Weiss, a 25-year veteran in healthcare communications, the agency has grown to over 275 employees serving clients from offices in San Francisco, New York, Washington, D.C., Austin, Los Angeles and London. WCG’s seasoned professionals specialize in branding, design, digital, interactive, social and traditional marketing, location based marketing, corporate and product PR, media, investor and advocacy relations, clinical trial recruitment and grassroots direct-to-patient communications campaigns.

The company was named the 2011 Digital Agency of the Year by The Holmes Report, was ranked #5 of Top Independent PR Firms and #2 of top healthcare PR firms by O’Dwyer’s, and was ranked #7 on PRWeek’s 2011 US Agency Rankings.

For more information, please visit www.wcmworld.com

WEBER SHANDWICK

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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, the Weber Shandwick healthcare practice is at the-ready to meet clients’ needs. Our team of seasoned healthcare strategists offers expertise in biotechnology, pharmaceuticals, consumer health products, medical devices, insurance and health maintenance organizations, health associations, health systems and hospitals.

We provide strategic, full-service public relations, including the following key offerings and services: scientific communications, medical education, regulatory milestone communications, market seeding and development, new product launches, sustained patient awareness programs, disease awareness and prevention, issues and crisis management, advocacy group relations, health policy initiatives, alliance building and corporate communications.

Our scientific communications capability separates Weber Shandwick from competitors. With 19 full-time PhDs worldwide to provide clinical insight and strategic messaging, we use basic science and clinical data to create, expand or preserve a market; shape professional opinion; raise awareness of an issue; change the standard of care or defuse a potentially threatening situation. Our counsel and campaigns better enable our clients to create, strengthen and extend corporate reputation; educate, engage and activate employees; promote new products and services to healthcare professionals and consumers; influence policy makers and regulatory agencies on key healthcare issues; and educate the general public about a wide range of healthcare issues.

Clients include Abbott Labs, Novartis, Eli Lilly, Johnson & Johnson, Bausch + Lomb, Boston Scientific, Roche and The Bill and Melinda Gates Foundation.

Weber Shandwick is the first healthcare communications agency in the U.S. to be fully certified for promotional regulatory compliance.

OCTOBER 2012  WWW.ODWYERPR.COM  ADVERTISING SECTION
# O'Dwyer's Rankings
## Top Healthcare & Medical PR Firms

| 1. Edelman       | New York       | $114,588,421 |
| 2. WCG           | San Francisco  | 43,350,100   |
| 3. Ruder Finn    | New York       | 30,401,000   |
| 4. APCO Worldwide| Wash., D.C.    | 22,741,000   |
| 5. Cooney/Waters Group | New York | 20,433,000 |
| 6. Waggener Edstrom | Bellevue, WA | 7,935,000   |
| 7. GYMR          | Wash., D.C.    | 5,969,294    |
| 8. Spectrum      | Wash., D.C.    | 5,728,753    |
| 9. Makovsky & Co.| New York       | 5,000,000    |
| 10. Hager Sharp  | Wash., D.C.    | 4,796,177    |
| 11. Revive Public Relations | Santa Barbara | 4,600,000 |
| 12. Crosby Marketing Comms. | Annapolis | 4,440,982 |
| 13. Jones Public Affairs | Wash., D.C. | 4,272,403 |
| 15. MCS Healthcare PR | Bedminster, NJ | 3,771,495 |
| 16. Dodge Communications | Alpharetta, GA | 3,602,980 |
| 17. Padilla Speer Beardsley | Minneapolis | 3,465,430 |
| 18. Communications Strategies | Madison, NJ | 3,446,709 |
| 19. Coyne PR     | Parsippany, NJ | 3,375,000 |
| 20. Rasky Baerlein | Boston        | 3,058,884   |
| 21. Public Communications Inc. | Chicago | 2,897,367 |
| 22. MWW Group    | E. Rutherford, NJ | 2,500,000 |
| 23. LaVoie Group | Salem, MA      | 2,385,063    |
| 24. French | West | Vaughan | Raleigh | 2,336,112 |
| 25. Finn Partners | New York       | 2,205,000   |
| 26. CRT/tanaka   | Richmond, VA   | 2,185,453    |
| 27. Allison+Partners | San Francisco | 2,100,000   |
| 28. Gibraltar Associates | Wash., D.C. | 1,801,500   |
| 29. Qorvis Communications | Wash., D.C. | 1,800,000   |
| 30. RF | Binder Partners | New York | 1,700,000   |
| 31. Zeno Group   | New York       | 1,636,938    |
| 32. Lambert, Edwards & Assoc. | Grand Rapids, MI | 1,521,000 |
| 33. Gregory FCA Communications | Ardmore, PA | 1,500,000   |
| 34. Singer Associates | San Francisco | 1,450,387   |
| 35. Black Twig Communications | St. Louis | 1,400,000   |
| 36. Levick Strategic Communications | Wash., D.C. | 1,308,190 |
| 37. Dye, Van Mol & Lawrence | Nashville | 1,239,963 |
| 38. Moore Consulting | Tallahassee | 1,221,217 |
| 39. Standing Partnership | St. Louis | 1,013,908   |
| 40. McNeely Pigott & Fox | Nashville | 994,702    |
| 41. Rosica Communications | Paramus, NJ | 930,118     |
| 42. rbb Public Relations | Miami | 863,816    |
| 43. Seigenthaler PR | Nashville | 626,000     |
| 44. Merritt Group | Reston, VA | 596,000   |
| 45. BlissPR | New York | 550,000    |
| 46. Davies | Santa Barbara | 513,701 |
| 47. Jackson Spalding | Atlanta | 513,372    |
| 48. TGI Healthworks | Upper Nyack, NY | 472,000 |
| 49. Maccabee | Minneapolis | 387,061    |
| 50. Regan Communications Group | Boston | 328,000    |
| 51. L.C. Williams & Associates | Chicago | 296,326    |
| 52. Bridge Global Strategies | New York | 273,427    |
| 53. Schneider Associates | Boston | 255,673    |
| 54. TransMedia Group | Boca Raton | 250,000    |
| 55. GodwinGroup | Jackson, MS | 228,013    |
| 56. CooperKatz & Co. | New York | 217,508    |
| 57. Red Sky PR | Boise | 212,614    |
| 58. Open Channels Group | Ft. Worth | 203,826 |
| 59. Beehive Public Relations | St. Paul | 172,912    |
| 60. Guthrie/Mayes & Associates | Louisville | 129,555    |
| 61. Trevelino/Keller | Atlanta | 120,000    |
| 62. Richmond PR | Seattle | 115,716    |
| 63. Phillips & Co. | Austin | 85,745     |
| 64. Furia Rubel Communications | Doylestown, PA | 78,300    |
| 65. Lane PR | Portland, OR | 43,641    |

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“Walking back” a mistake

By Fraser Seitel

In September, Dunkin’ Donuts emailed its New York area customers a special offer to have lunch with dreaded rival tight end Rob Gronkowski of the hated New England Patriots, coached by the loathsome Bill Belichick.

Could this missive to outraged Giants and Jets fans have been some sort of colossal mistake? Yup. Within hours, Dunkin’ “walked back” its errant email with the following:

We may have accidentally sent you an email earlier today about a chance to have lunch with Gronk at Gillette Stadium. This promotion is intended for our Dunkin’ fans in select New England markets. We apologize for any inconvenience. But do feel free to stop by your local Dunkin’ Donuts and try a delicious Dunkin’ Bakery Sandwich. Because no matter what team you root for, every football fan needs to tackle their hunger.

Sincerely,

The Dunkin’ Donuts Team

The PR tactic of “walking back” a damaging statement, misguided judgment or wrongheaded reaction is very much in the news these days. Technically, “walking back” a comment means backing off the original comment, when public backlash renders the earlier statement embarrassing or even untenable.

Last month, when former Vice President Dick Cheney remarked that it was “a mistake” for the Republicans to have selected Sarah Palin as VP candidate, the former sharpshooter hot tailed it to Sean Hannity to walk back his previous pronouncement.

Clarified Cheney, “My point basically dealt with the process in terms of that basic requirement: Is this person prepared to step in to be President of the United States when they’re picked? And it was my judgment — I was asked if I thought the McCain process in ’08 had been well done or was it a mistake, and I said I thought it was a mistake.”

So there!

More recently, of course, the candidates for President were busy walking back their own foot-in-mouth statements, regarding the latest September 11 anti-American violence in the Middle East.

After President Obama told Telemundo that he didn’t consider Egypt either an “ally” or an enemy, the White House jumped on the backtrack machine.

“I think folks are jumping way too much into this,” said a White House spokesman, after it was verified that Egypt was one of 16 nations, including Israel and Japan, which share “major non-NATO ally status” with the U.S.

Obama, said the spokesman, was well aware of Egypt’s status, but rather was speaking “colloquially.”

“As the president has said, Egypt is a longstanding and close partner of the United States, and we have built on that foundation by supporting Egypt’s transition to democracy and working with the new government,” the spokesman explained in his “walk back.”

In subsequent days, the Obama “spin machine” proceeded even to suggest that the President may have purposely planted the seed that in light of the anti-American riots in Cairo, the Egyptian government better get its act together if it wants the U.S. to remain an “ally.”

Indeed, part of “walking back” a misguided comment is an effort to cause doubt that the original statement, even though questionable, may not have been entirely unplanned.

Which brings us to Mitt Romney. The challenger’s knee-jerk response to the turmoil in Egypt and Libya that cost the lives of four American diplomats was not only unnecessary but also just plain dumb; there is simply no way around it.

After a PR staffer issued a statement from the Cairo U.S. Embassy — which the White House later disavowed — that “condemned the continuing efforts by misguided individuals to hurt the religious feelings of Muslims,” Romney immediately stomped in.

After expressing outrage at the U.S. deaths, Romney’s statement read, “It’s disgraceful that the Obama Administration’s first response was not to condemn attacks on our diplomatic missions, but to sympathize with those who waged the attacks.”

Ill-timed. Bad taste. Blatantly political; an incompetence trifecta, in terms of wrong-headed reactions that exposed a campaign brain trust that may be long on “trust” but decidedly short on “brain.”

Fortunately for Romney, someone in his camp had the good sense to start “walking back” the potentially suicidal comment almost immediately.

At his next campaign stop in Virginia, Romney stayed on the message of “grieving” about those lost and refused to return to the ill-conceived comments that got him into the firestorm.

“I know that we’ve had heavy hearts across America today, and I want you to know things are going to get a lot better. But I also recognize that we’re in mourning. We’ve lost four of our diplomats across the world. We’re thinking about their families and those that they’ve left behind,” was the candidate’s new mantra.

During the Presidential debates, Romney will get ample chance to explain why he believes America needs “new leadership in the world.” For a moment last month, it looked like Romney might bury himself with a self-inflicted verbal mortar.

Fortunately for Romney, he was able to “walk back” the mistake enough to remain in the fight.

Professional Development

PR service briefs

ERN WORKS $118 GENOME DEAL

Chinese genome sequencing company BGI-Shenzhen is working with Brunswick Group in the U.S. and China as it moves to acquire Silicon Valley-based Complete Genomics in a cash tender worth $117.6 million.

Waggener Edstrom works with CG, which said the deal came after reviewing “alternatives” with its outside advisors.

The $3.15-per-share deal will make CG a subsidiary of Shenzhen-based BGI, which has also engaged proxy firm Innsfree M&A.

Brunswick’s San Francisco and Hong Kong offices are supporting media relations and PR counsel for BGI.

The combination of the companies’ resources provides an opportunity to accelerate our vision of providing researchers and physicians with the genomic information needed to prevent, diagnose, and treat cancers and other genetic diseases,” Dr. Clifford Reid, chairman and CEO of Complete, said in a statement.

The cost of genetic sequencing has fallen in recent years as technology improves, increasing its potential for medical research and the development of treatments.
How to obtain higher profitability (part II)

By Richard Goldstein

By way of refresher, the July column focused on using financial ratios to manage profitability. The basics were discussed: using a time and billing system; prepare a budget; watch staff productivity, etc. It also reviewed industry benchmarks that, according to industry consultants, are indicative of thriving firms. One key benchmark for example is that agency operating profit should approximate 25 percent.

Building blocks to profitability

Rick Gould, Managing Partner of Stevens Gould Pincus, coined a phrase, “The Breakthrough Equation.” The equation sets revenue at 100 percent and targets labor at 50 percent of revenue, operating expenses at 25 percent of revenue leaving operating profit of 25 percent. From operating profit income taxes need to be paid. Therefore, the amount of profit that can be reinvested back into the agency or used for other purposes can be half of the operating profit. To put this into perspective, if revenues are $2M, bottom line profitability will be $250,000. Not bad, but nothing to write home about either. Also, in looking at overall profitability, owner compensation needs to be “normalized.” The salary of an agency owner can be $250,000 for one agency and $500,000 in another, both having 25 percent operating profit. Therefore, I believe the industry benchmark should be at 33.3 percent for operating profit. Can this be done? I believe it can!

In August, I discussed how to obtain higher profitability. I introduced a concept: “The Building Blocks to Profitability.” That column defined some terms: cost object, direct costs, indirect costs to name a few.

Job costing

The second building block is to understand job costing as the foundation for the rest of the building blocks. The first is budgeting. When it comes to 25 or 33 percent profitability, the way you get there is to have each client you have earn 25 or 33 percent profitability, if not higher.

The best way to determine client profitability is to subtract from client revenue direct salary costs and overhead. The first step is easy - how much did the agency bill and collect or expect to collect. Next subtract salary costs, not just salary but medical insurance, life insurance, payroll taxes, and pension costs. Your billing and time keeping system now comes in handy. (By the way, it is my belief that time keeping inhibits value billing and should not be used as the sole method of charging a customer. It is an accounting and profitability tool, nothing more! It provides information to run your business.)

The next step is to understand what is meant by “overhead.” Bottom line is that overhead is anything that is not a direct cost. Remember that we defined a direct cost as those costs that are related to a particular cost object (customer) and can be traced to the customer in an economically feasible way. You need to know your overhead percentage. To arrive at this divide total direct costs by direct billable salary costs. Initially, the overhead percentage can be determined form the agency budget. The estimated overhead percentage can be adjusted in the future.

An example: assume ABC PR earns $30,000 from a customer. The total direct labor cost charged to the engagement is $19,000 and overhead has been determined to be 82 percent. An analysis of this customer is as follows:

<table>
<thead>
<tr>
<th>Revenue</th>
<th>$30,000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salary Costs</td>
<td>$20,000</td>
</tr>
<tr>
<td>Overhead</td>
<td>$16,400</td>
</tr>
<tr>
<td>(82% of $20,000)</td>
<td>($20,000)</td>
</tr>
<tr>
<td>Loss</td>
<td>$6,400</td>
</tr>
</tbody>
</table>

If nothing more, the analysis will at least provide information to make a decision about a customer and/or the way you service the customer. Bring it along the next time you have a fee discussion. (Be prepared to justify the overhead percentage as being in line with industry benchmarks.)

Technically, this type of analysis should be done before you quote a fee, not after the dust has settled. In the above example, what would your response be if the customer requested the fee to be capped at $25,000?

The concept of “realization” is always used in the service industries. If you do not keep records however, the concept will be a meaningless term for you. If total chargeable hours are 500, the fees billed and collected should be, for example, $125 an hour, $62,500. If only $40,000 is realized, the realization percentage is 64 percent. Not good! You need to target at a minimum 75 or 80 percent (better to be at 100 percent).

If you anticipated an 80 percent realization at the start of the engagement, something happened — excess or over servicing, “dumping of time,” scope creep (you did work beyond the engagement letter and did not bill for it). By the way, it is difficult to know what it costs to service a customer if staff is not honest about their time. The key is to monitor the engagement and talk to your team during the engagement not after it is completed. (I will provide you some tools down the road to take care of this.)

PR news briefs

PR spending to return to pre-recession levels

U.S. communications spending, including PR, advertising and marketing services, will rise 5.2% this year to hit nearly $1.2 trillion in a return to spending not seen since the economic downturn as consumers and business embrace digital technology, according to a forecast by Veronis Suhler Stevenson.

Traditional marketing, buoyed by political campaign spending on PR and word-of-mouth marketing, is expected to rise 4.2% this year to $75.9 billion. VSS said it expects a 4.2% compounded annual growth rate through 2016, a cycle that includes two presidential elections and a mid-term election cycle, as well as “strong growth” in PR and WOMM, and a turnaround in B2B promotions, hitting $89.3B in 2016.

PR and WOMM grew 12.4% to $6.41 billion in 2011, the report found.

John Suhler, President of VSS, said digital is now a “constant and significant factor” in every sector and sub-segment of the U.S. communications industry. He forecasts digital-related spending to become 40% of the overall communications spending in the U.S. by 2016.

Traditional consumer advertising, by comparison, will post a modest 2% gain this year to $146.6 billion, said VSS, as gains from the Olympics, broadcast TV, and broadcast and satellite radio are tempered by declines in newspapers, magazines and local consumer directories. Advertising overall, however, is expected to post the largest compounded annual growth rate through 2016 of 6.1% as Olympics, political ads and the shift to digital ads flows to the sector.
Obama: great orator, poor strategic communicator

By Richard E. Nicolazzo

In a recent fiery campaign stump speech, vice president Joe Biden delivered a crisp, easy-to-grab sound bite when he said, “Osama bin Laden is dead, and General Motors is alive.”

Why didn’t president Obama think of that?

With the presidential election in the home stretch, it’s time to look back and grade the nation’s chief executive on his communications performance.

After capturing more than 64 million popular votes and thrashing John McCain 365-162 on the 2008 electoral scorecard, Obama assumed what is arguably the toughest job on the planet.

The new president, without executive branch experience, had to manage two wars, protect the country from terrorists, stabilize a shaky financial system on the verge of collapse, rebuild a sagging economy and deal with the ever-explosive Middle East.

In short, he entered the world of governing and “managing expectations” by making commitments, chief among them, to rebuild the economy and create jobs.

With the major issues in the U.S. (and the world) so complex, contentious and seemingly insolvable, in my view, a successful presidency comes down to not only what was accomplished but how those achievements have been communicated to the American public.

President Obama’s failure to communicate may lie in his deep-rooted belief that if you sit with rational people and make compelling arguments, something will be accomplished. The problem is, politics is not a rational discussion.

Things got off to a good start four years ago. Just 24 days after his inauguration, the President’s $800 million stimulus package passed Congress. Remember the “rebuilding America” signs across the country? Somehow, that accomplishment was lost in the “noise of the campaign.”

Using every ounce of political clout and goodwill possible, what is commonly called Obama-Care was passed by Congress. Presidential insiders advised Obama to settle for a “skinny” alternative that would have eased in change. Instead, the president insisted on the whole package.

The result is legislation that polarized the American public (despite a Supreme Court victory) and muddied the waters. If you asked average Americans to explain how the new healthcare plan will affect them, my guess is nine of 10 couldn’t do it. The communications challenge of such a massive new law has overwhelmed the White House.

Vanishing press conferences

In terms of direct outreach to Americans, Obama maintains his weekly video address which emanates every Saturday morning from the White House website. But let’s face it, this is static means of communication that excites no one. Do you ever hear anyone talking about these addresses when you head back to work on Mondays?

Given his remarkable oratory skills, I’m surprised Obama has followed in the footsteps of his predecessor George W. Bush and de-emphasized the press conference. People still refer to JFK’s press encounters in the 1960s as a masterful way to communicate messages. The nation also warmed to president Roosevelt’s fireside chats, and past presidents like Ronald Reagan and Bill Clinton knew how to communicate and connect with Americans by developing platforms, symbols and messages that resonated with the public.

This year, the president has held only one fully-interactive, multi-issue press conference. As a candidate four years ago, Obama, then a senator, mused aloud about holding a news conference every month. In reality, at one point he went 308 days between press corps encounters, even exceeding president George W. Bush’s longest gap of 204 days.

Many experts believe the dwindling frequency of these East Room events stems from the fragmentation of prime time TV and the prominence of other social media outlets such as Twitter and Facebook. Still, if done properly, a White House press conference is the most accessible and powerful venue for Americans to not only learn the views of their leader but observe, understand and analyze the thinking.

In reality, millions of Americans running around with iPhones, iPads, Blackberrys and other electronic devices have greater access than ever to see their President in action. Why not give them the opportunity?

Economic realities

At the convention and on the campaign trail Obama has continued to emphasize that he’s fulfilled his core promises: pulling the country back from the economic abyss, getting the troops out of Iraq and setting a plan to withdraw from Afghanistan, rescuing the auto industry, killing the world’s top terrorist, imposing Wall Street regulations, signing a nuclear treaty with Russia, and cutting taxes for the middle class.

What’s been much harder is communicating a vision on the economy that makes Americans believe that unemployment rates over 8% are declining. This is where rhetoric collides with reality. The president can’t change the numbers, so trying to communicate good news juxtaposed against government statistics becomes the ultimate communications challenge. This is an area where Obama has likely over-promised, falling into the trap of many past presidents.

Numbers released on Sept. 7 by the U.S. Bureau of Labor Statistics indicate the economy remains stuck in low gear, producing fewer jobs and stagnant paychecks. Although the actual unemployment rate fell to 8.1% from 8.3%, some 12 million Americans are still looking for work and thousands have given up.

With unemployment stuck above the 8% mark and his approval rating below 50%, Obama is clearly in the political fight of his life. Consequently, as a communicator, he has lost some of the eloquence of his earlier campaign and turned this race into a series of cheap verbal attacks about his opponent. This might make great headlines, but does not allow Americans to understand the importance of the substantive issues we face.

While Obama’s convention speech was eloquent and forceful, it lacked the punch of 2008. Saying he was “mindful of his own failings,” the President stuck to the long-term approach in a time when every American wants the economic pain to stop now.

Admittedly, presidents always have a difficult agenda. As President Eisenhower said to JFK the day before Kennedy was inaugurated, “You’ll find that no easy problems ever come to the President of the United States. If they are easy to solve, somebody else has solved them.”

Nevertheless, in my view, Obama’s failure to consistently communicate his key messages on important policy issues such as the economic recovery and jobs may ultimately cost him his job.
The use, misuse and disuse of ‘sorry’

By Paul Oestreicher

The 19th century fairytale “Goldilocks and the Three Bears” provides us with an important communication checklist: Is something too much, too little or just right?

In our profession — especially in managing issues and crises — we attempt to match the response with the language and tone appropriate to the circumstances. This applies to apologies, too. Does the situation deserve an apology? If so, will the apology be too weak, will it be viewed as over-apologizing, or will it be pitch-perfect and accepted as authentic?

As recognition of an apology’s importance has grown, the number and demand for apologies have exploded. However, I don’t believe it’s because we’ve become a more sensitive or civil society. More and more, apologies are being used to gain leverage. Did you perceive a slight? Demand an apology. Was there a missed milestone? Demand an apology. It’s a strategy of putting your adversary on the defensive.

It’s interesting to note that Republican presidential candidate Mitt Romney has staked a claim on the strategy of making no apologies. Indeed, in his book “No Apology: The Case for American Greatness,” he makes the case that apologies have no place in American policy; he believes they’re a grave weakness.

In 2009, when newly inaugurated President Obama went overseas in an attempt to repair damaged relationships, former Governor Romney went on the “Today Show” and said, “Of course America makes mistakes but what we have done to sacrifice in terms of blood and treasure for the freedom of other people is beyond anything any other nation has done in the history of mankind. And so that, if you will, overshadows all the mistakes and it suggests that you don’t go around the world apologizing…”

Here, I see a gaping ethical hole. Yes, you can cash-in the good deeds and goodwill you’ve banked over time to give you the benefit of the doubt in an uncertain situation. But a previous record of good does not immunize any one or any organization or any government from accepting responsibility for a serious error or worse.

Beyond the issue of too hot, too cold or just right, there’s the issue of timing. While there’s fairly broad bipartisan agreement that Romney jumped the gun when he criticized the President for what he viewed as an apology in the face of violence directed at our brave representatives serving in our embassies in Egypt and Libya, there’s an opposite problem.

In the past month, there have been some stunning examples of apologies coming too late.

Twenty-three years after 96 soccer fans were crushed to death in what’s been called the Hillsborough Disaster, UK Prime Minister David Cameron apologized for government efforts to blame the victims.

Even more ill timed (and ill conceived) was the apology from the German drug firm Gruenenthal, makers of thalidomide. Fifty years after the drug was pulled from the market, CEO Harald Stock said, “We ask for forgiveness that for nearly 50 years we didn’t find a way of reaching out to you from human being to human being. We ask that you regard our long silence as a sign of the shock that your fate caused us.”

Thalidomide, you may recall, was a sedative given to pregnant women in the 1950s and 60s for morning sickness. Tragically, babies were born with very serious birth defects, including missing arms and legs.

The suspicion and anger caused by the half century delay was compounded by the claim that it was caused by the company’s own grief — a 50 year-long post-traumatic stress that somehow erased their ability to reach out to the right people with the right words. What an absurd and insulting attempt at rationalizing an egregious decision.

It’s a reminder that poorly developed and executed communications can do more harm than good.
J&J’s Jordan moves to Amgen

Ray Jordan, a prominent pharmaceutical PR exec who leads global corporate communications and public affairs for Johnson & Johnson, took a top corporate affairs slot at biotech giant Amgen in early October.

Jordan, Corporate VP of PA and Corporate Comms. at J&J, exited the company after nine years and a tumultuous recent few amid several high-profile recalls and the retirement of CEO William Weldon in April. Jordan joined Amgen, based in Thousand Oaks, Calif., on Oct. 1 as senior VP, Corporate Affairs, a new position reporting to President and CEO Robert Bradway. He oversees internal and external communications, issues management and philanthropy.

David Polk, who was Executive Director of Corporate Communications at Amgen, joined Weber Shandwick’s Corporate Practice in Chicago in January as an executive VP. Phyllis Piano stepped down as VP/Corporate Comms. in September 2011.

Prior to J&J, Jordan was VP/comms. and information at Pfizer and chaired the drug industry trade group PhRMA’s public affairs unit. He started out as a journalist before moving to the healthcare sector with Bristol-Myers.

Bill Price, VP of Media Relations for J&J, told O’Dwyer’s the company has not named a replacement for Jordan. “His direct reports will report to Michael Sneed, VP of Corporate Affairs,” he said. “Other organizational decisions will be announced in the future.”

Amgen had Q2 revenue of $4.2 billion on net income of nearly $1.3 billion.

Marsh Comms. head exits for BMI

Silvia Davi, who led Corporate Communications and Brand for Marsh & McLennan Cos. for the past year, has moved to music rights manager Broadcast Music Inc. to head Strategic Comms. and Marketing.

BMI is one of a trio of entities — with ASCAP and SESAC — which manage artists’ royalties and licensing fees. BMI artists include Sting, Lady Gaga, Sheryl Crow, Kanye West and the late Michael Jackson, among others.

Davi, as a VP, leads global PR, branding, social media, internal comms., corporate marketing and online comms. for New York-based BMI, reporting to Senior VP Richard Conlon.

Prior to joining Marsh in April 2011, she was VP of Corporate Comms. and Head of Global broadcast media strategy at NASDAQ OMX and director of PR at Instinet Group. She worked on the agency side at Edelman and Ogilvy PR.

Hanna Bolte left an assistant VP/Corporate Comms. slot at BMI last year for mum2.

Marsh & McLennan was not reached about a replacement.

KPMG grabs PWC exec for Global Comms. post

KPMG has recruited rival PwC’s U.K. Director of Communications, Brian Bannister, for a new post to head global communications for the accounting and consulting giant’s international operations, based in London.

Bannister is slated to join KPMG in December after five years at PwC. He previously directed communications and marketing for the Institute of Chartered Accounts in England and Wales and, earlier, led corporate communications for BSI.

KPMG, which operates in 152 countries, is one of the so-called Big Four account firms, with PwC, Deloitte Touche Tohmatsu and Ernst & Young.

Seth Oster, an EPA and Napster alum, joined Montvale, N.J.-based KPMG in December as Executive Director of Communications.

Edelman bolsters digital, mobile offerings

Brad Mays, who was global engagement practice chief for healthcare firm WCG, has joined Edelman’s office in Austin. He takes the Senior VP/Digital post and reports to Morris Denton, Austin GM.

Prior to WCG, Mays was Senior VP at Fleishman-Hillard. He has designed digital programs for AT&T, Chevrolet and Hershey’s.

Edelman also recruited Tim Hayden as Senior VP/Mobile Strategy. He’s Co-Founder of 44Doors, a mobile marketing platform/services company. Earlier, Hayden was Partner at Blue Clover studios and CEO of GamePlan, an experiential firm.

Hayden reports to David Armano, Managing Director of Edelman Digital in Chicago.


Edelman Digital does work for Volkswagen, Ben & Jerry’s and Adobe.

Shetty helms Newsweek Daily Beast

Abha Shetty, chief strategy and chief media officer for ad agency Hill Holiday, has been named CEO of The Newsweek Daily Beast Company as the media company makes a deeper push into events.

Current CEO Stephen Colvin, a veteran media executive who helped build The Daily Beast from a start-up in 2009, will exit in October to become Executive in Residence at VC firm Lerer Ventures.

Tina Brown, Editor-In-Chief of NDB, said: “He is extremely gifted at brand and digital strategy, is a strong leader, and is the perfect partner for the next phase of The Newsweek Daily Beast Company and our expanding live events business.”

TNDBC marked the second year of its Women in the World summit in March and plans the upcoming Hero Project, a D.C. summit slated for November examining the “essentinal elements of moral, political, intellectual and physical courage, resilience, and selflessness” and featuring guests like Adm. William McRaven, Madeleine Albright and Bono.

Shetty, who collaborated with the magazine-website combine for its popular “Mad Men” issue previously with Fallon Worldwide and was an analyst at Forrester Research.

“[Internet consultant and writer] Clay Shirky says ‘it’s not information overload, it’s filter failure’ and The Daily Beast philosophy of “read this, skip that” brilliantly solves filter failure — there’s a reason the site is growing faster than any other in the category,” said Shetty.
O’Dwyer’s Directory gives you quick access to large, medium-sized, and small PR firms and even experienced freelancers who work out of their homes. Whether you seek a long-term, worldwide relationship or need extra help on a project, O’Dwyer’s Directory is the place to shop.

Listed firms have expertise in:

- Public Relations
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- Internet PR
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- Crisis Communications
- Integrated Marketing
- Corporate Advertising
- Lobbying
- Proxy Solicitation
- International PR

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- Has brought billions of dollars in business to PR firms.
- Authoritative industry rankings, based on CPA statements, tax returns.
- Separate rankings for independent and ad agency-related PR operations.
- Firms ranked by 16 geographical regions in the U.S.
- Leaders ranked in 12 specialized categories: agriculture, beauty & fashion, entertainment, environmental/PA, financial, food & beverage, healthcare, home furnishings, professional svcs., sports/leisure, technology and travel.
- Easy-to-use, PR firms sorted geographically and by 21 types of PR specialties. Firms listed alphabetically.
- Articles on how to hire and use a PR firm by industry experts Jack O’Dwyer and Fraser Seitel.
- 7,000+ clients are cross-indexed. O’Dwyer’s Directory of PR firms is the only place you can look up a company and determine its outside counsel.
Ogilvy Washington and client the National Institutes of Health took home “Best in Show” honors from PR Society’s National Capital Chapter at its 44th annual Thoth Awards event on Sept. 13.

The WPP firm’s work on the National Kidney Disease Education Program earned the top nod at the National Press Club in Washington before nearly 200 attendees.

Ogilvy, which won eight Thoth awards in all for work with clients like The Computer Sciences Corp., Merck and the Internal Revenue Service, was followed by Ketchum with five awards, leading a slate that included 31 total Thoth awards and 20 certificates of excellence for PR work in the region.

Suzanne Holroyd of the Dept. of Defense, who heads the PR Society chapter, said the winners “implemented innovative communications strategies and demonstrated the true value of public relations by achieving impressive and accountable results.”

Two-time Olympic figure skater and D.C. native Michael Weiss was a special guest presenter.

Complete list of winners is at prsa-ncc.org.

Pawlenty to rep financial sector

Former GOP presidential candidate and Minnesota Governor Tim Pawlenty will take the reins of the Financial Services Roundtable, the D.C. group representing the heads of the world’s biggest banks and financial institutions.

Pawlenty, who was considered for the Vice President slot on Mitt Romney’s ticket and is co-chair of the Romney campaign, takes the post Nov. 1 on the retirement of Steve Bartlett, a former Republican Congressman and Dallas Mayor who held the Roundtable post since 1999. Pawlenty is stepping down from the Romney campaign.

Allstate CEO Tom Wilson, who chairs the Roundtable, cited Pawlenty’s ability to find common ground in making the announcement today. “He understands that while policy makers sincerely desire to improve economic opportunities for all Americans, they also have different political philosophies,” said Wilson.

Pawlenty, 51, was Governor of Minnesota from 2003-2011 after serving in the state’s house of representatives.

“I realize there is still work to be done to continue to earn customers’ confidence,” Pawlenty said in a statement.

BGR PR works with the Roundtable. Elise Brooks is Director of Communications.

Chevron taps Capitol Counsel

Chevron has hired Capitol Counsel, the firm of former powerful Republican Congressman Jim McCrery, for input on tax reform.

The Louisiana Republican served as ranking member of the House Ways and Means Committee and was a member of the Joint Committee on Taxation.

McCrery is assisted by John O’Neil, who was Policy Director to former Republican Whip Trent Lott of Mississippi and tax counsel to the Senate Finance Committee, and Dena Battle, ex- aide to GOP Congressmen Dave Camp and Nick Smith.

Chevron uses BGR Government Affairs, which is the home of former Mississippi Governor Haley Barbour, as its lead shop. BGR received a $150,000 payment during the second-quarter.

The California-based oil giant dropped Ogilvy Government Relations on June 1 after making a first-quarter payment of $150,000 to the WPP unit.
Guatemala's $575 A&P pact

Guatemala, which suffers one of the highest murder rates in Central America, has given Arnold & Porter a $575,000 four-month pact to promote tourism and investment by pursuing its legal, media and public policy objectives in Washington.

According to the pact that runs through Dec. 31, the agreement is “justified by the need to attract foreign investment and tourism though improvement in Washington D.C., and in the various strata of the United States, of the way the Guatemalan investment climate is perceived.”

The “relevance of tourism lies in its attraction, that apart from generating foreign currency it also creates a virtuous circle where more tourism and more investment result from an improved image.”

The U.S. Marines returned to Guatemala in August, patrolling its west coast in the fight against drug traffickers. America’s military intervened to put down a peasant uprising in Guatemala fifty years ago, and withdrew in 1978. More than 200,000 people were killed during that span.

The United Nations, on Sept. 11, decided to extend the life of its International Commission Against Impunity in Guatemala, which probes official corruption, for another three years until 2015. Nearly 2,000 policemen and government employees have been either fired or jailed since the U.N. panel set up shop.

A&P’s contract is with the Government of Guatemala and the Guatemalan Institute of Tourism, which promotes the land as the “heart of the Mayan world.”

Israel lobby’s new spokesman

The American Israel Public Affairs Committee, the influential D.C. lobbying group for the Jewish state, has brought in Senate Communications Director Marshall Wittman as Spokesman, according to a report.

Ari Goldberg earlier this year stepped down as Spokesman and Director of Media Relations for AIPAC after a year on the job to take up similar duties at the global anti-poverty ONE campaign in Washington.

The Jewish news service JTA reported the 58-year-old Wittman’s appointment, which has not been announced by AIPAC.

Wittman most recently was communications director for Sen. Joe Lieberman (I-Conn.) and earlier served in that capacity for Sen. John McCain (R-Ariz.).

The New York Times, in a 2006 profile of Wittman, called him “one of the great career vagabonds, ideological contortionists and political pontificators ever to inflict himself on a city full of them.”

Earlier posts included the Dept. of Health and Human Services during the recent Bush administration and the Heritage Foundation.

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. For a complete list of filings, visit www.fara.gov.

Grayling Connecting Point, LLC, Washington, D.C., registered September 14, 2012 for Qatar National Food Security Programme (QNFSP), Doha Qatar, to provide public relations support and media outreach for the UN Framework Convention on Climate Change Conference in late 2012.

Arnold & Porter LLP Washington, D.C., registered September 14, 2012 for Instituto Guatemalteco de Turismo - INGUAT (Guatemalan Institute of Tourism), Republic of Guatemala, to provide services with respect to the promotion of investment and tourism through the development of a strategy regarding Guatemala’s legal, media and public policy objectives in Washington, D.C.

Fianna Strategies, LLC, Washington, D.C., registered September 12, 2012 for Office of the Prime Minister of Georgia, Tbilisi, Georgia, to provide strategic advice about explaining the programs, initiatives and policies of the Government of Georgia to relevant U.S. audiences.

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.

Mercury/Clark & Weinstock, Washington, D.C., registered September 18, 2012 for Qatar National Food Security Programme (QNFSP), Arlington, VA, regarding proposed combination of BAE Systems and EADS.

The Arnold Agency, Washington, D.C., registered September 18, 2012 for Adena Health Foundation, Chillicothe, OH, to identify federal funding and strategic partners to improve healthcare access, quality and innovation.


Martin & Seibert, LC, Martinsburg, WV, registered September 17, 2012 for Express Scripts, Cool Valley, MO to limit prescription drug abuse by closing the cash loophole and creating a self-pay Rx Adjudication System to track self-pay transactions of prescription drug sales and to provide law enforcement officials the means to track and identify the sale of prescription drugs.

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SPECIAL EVENTS

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The National Press Club, a private club for journalists and communicators, has been "Where News Happens" for more than a century. Each year, the Club hosts over 250,000 visitors at more than 2,000 events that are conveyed to global audiences in print, television and online. Our journalist members work with the NPC staff to create an ideal facility for news coverage – from a full service broadcast operation, to fiber and wireless connectivity, to audio-visual services.

PR JOBS - http://jobs.odwyerpr.com

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Editorial Calendar:
January, PR Buyer’s Guide/Crisis Comms.
February, Environmental PR & Public Affairs
March, Food & Beverage
April, Broadcast Media Services
May, PR Firm Rankings
June, Multicultural/Diversity
July, Travel & Tourism
August, Prof. Svcs. & Financial/Investor Relns.
September, Beauty & Fashion
October, Healthcare & Medical
November, Technology
December, Sports & Entertainment

O’Dwyer’s 2012 Directory of PR Firms gives you quick access to large, medium-sized, and small PR firms and even experienced freelancers who work out of their homes. 1,600 firms are listed. 7,000 clients are cross-indexed. O’Dwyer’s directory is the only place you can look up a company and determine its outside counsel.

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- Corporate Advertising
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