From Here to Maternity: Birth of an Online Marketing Campaign

Introduction
A key principle in current health reform discussions is the need to engage consumers in understanding and making health care choices. Over the last decade many health plans, nonprofits, and government agencies have attempted to provide resources that consumers can use to evaluate health care providers. More than 200 examples of health quality ratings programs are listed in the Health Care Report Card Compendium assembled by the Association for Healthcare Research and Quality. Though these tools are potentially very helpful, research shows that few consumers make use of them. In 2007, only 23 percent of Californians said they were aware of rating information on hospitals, according to a California HealthCare Foundation (CHCF) survey. Far fewer (1 percent) actually used such information and changed their hospital choice as a result.

How can use of comparative health care information be increased? To test various options, CHCF conducted a pilot marketing project focused on maternity services in three regions—the San Francisco area, Sacramento, and San Diego—over a one-year period. The targeted campaign encouraged pregnant women to use the CalHospitalCompare.org Web site to assess maternity care at local California hospitals. This issue brief describes the project, results, and lessons learned.

Why Maternity? Why Online?
There were two major goals of the project: (1) increase its use for choosing a hospital for maternity care; and (2) learn which approaches are most cost-effective for promoting consumer use of health ratings services.

Maternity care was chosen for the focus of the campaign because childbirth is among the most “shoppable” of health conditions. Women often have several choices of providers, as well as the time and motivation to do research beforehand. As maternity is not often a high-risk condition, personal preferences frequently play into decisions.

The online setting was deemed appropriate for a relatively young target audience in regions with high online usage rates. Since CalHospitalCompare.org is itself an online tool, it seemed a logical fit to seek more users through the Web.

Strategy and Content
The campaign, developed with the help of Behr Communications, was conducted from June 9, 2008 to December 14, 2008 in the San Francisco Bay Area, with a second phase conducted in Sacramento and San Diego beginning in March 2009 and continuing through September 2009. A range of approaches and mechanisms were used to test and compare cost-efficiency and effectiveness of the outreach. Unique pages were created within the Web site to capture users accessing the site directly as a result of the campaign. The online media and other strategies included:

Placement/content. A set of display and text ads were created to communicate with expectant
mothers about hospital quality variation and the importance of researching maternity care options. (See Figure 1.) The ads were designed to engender trust by reassuring people that CalHospitalCompare.org is independent and unbiased. They were placed on specific Web sites and via ad networks on Yahoo and Google and targeted to the three geographic regions being tested. Placements included news publication Web sites, community participation sites (such as Yelp and Citysearch), and ad networks (Google and Yahoo). The ads were also placed via the Google content mechanism, which secured placements on additional relevant Web sites with maternity and hospital content throughout the Google network.

Search words. There were “ad word” buys of relevant search words on search engines, so that when the target audiences were looking for information on maternity and hospital issues, they would see the text ads directing them to the Web site. Search terms in four categories included the following:

- **Maternity/pregnancy:** baby, maternity, having a baby, pregnancy, motherhood, child birth, expecting moms, delivering a baby, breastfeeding, neo-natal care, pregnancy health
- **Birthing:** C-section, vaginal birth, giving birth, multiple C-section, caesarian section
- **General hospital reviews:** hospital ratings, hospital quality, reviews, and quality of care
- **Hospitals:** the name of every Bay Area/Sacramento/San Diego hospital providing maternity services and listed on CalHospitalCompare.org

Branded emails. CHCF used some well-known online opt-in subscriber networks, including Dailycandy.com, Vitaljuicedaily.com, and the San Jose Mercury News. Messages were sent directly to the target audiences through these networks. In each case, audiences were sent an email from (and in the “voice” of) the recognized brand, and given information about CalHospitalCompare.org.

Event. In addition to the online marketing campaign, the project included sponsorship of an event that directly fit the target audience—the San Francisco Birth & Baby Fair. For a relatively modest cost (under $5,000) the benefits included placement on all online and print outreach materials.
Results
The online ad campaign had an immediate impact and drove up visits to CalHospitalCompare.org dramatically. Before the San Francisco campaign began, only three of the 25 most-viewed maternity pages on CalHospitalCompare.org were of Bay Area hospitals; after the campaign began, all of the 25 most-viewed maternity pages (and 33 of the top 35) were in the Bay Area. Furthermore, in the month before the campaign began, there were 153 visits to Bay Area hospital maternity pages; during the subsequent seven months of the campaign, there were 1,710 visits per month, on average, to the same pages. This was an eleven-fold increase. Figure 2 shows Web traffic over the course of the campaigns, measured in unique visits to the Web site.

Lessons Learned
Several important insights were gained from the campaign. They are discussed below.

Matching the medium and the message to the audience. Identifying and understanding the target market consumer is a critical success factor. The campaign communicated specific information about the hospitals providing maternity services in the target market area; this was highly relevant information to women of childbearing age and pregnant women.

Target group diversity. It is important to offer a range of ads given the appeal of different messages to different audiences and to keep the campaign fresh. Individual ads had variable performance from site to site, and each of the ads had at least one site where it generated the highest click-through rates.

Figure 2. Visits to CalHospitalCompare.org, March 2008 to August 2009
Placement location. Understanding where potential users are already seeking information, and coming to them is important. There are wide variations in costs—both in awareness, as measured by cost per 1,000 impressions, and in use, measured by cost per click-through. Google and Yahoo placements had the highest return on investment for driving actual use of CalHospitalCompare.org.

Cost-effectiveness. Branded emails can be more expensive and therefore less cost-effective than other approaches. They are used to reach a more precisely targeted audience, since consumers opt in to specific networks when they are interested in its content. Prices are set high to reach this group. By tracking the clicks to CalHospitalCompare.org, the campaign found that approaching a wider audience through search engines like Google and Yahoo was more cost-effective than using the opt-in branded emails. In some cases, outlets offer branded emails as a free bonus.

Metrics and flexibility. By measuring results and re-aligning tactics along the way, campaigns can reallocate resources to online channels and content that are more cost-effective. This continuous adjustment approach maximizes flexibility for the campaign and ultimately achieves better outcomes.

For example, the campaign experimented with Yahoo’s Right Media, allocating an amount to Yahoo and enabling them to make direct online ad placements. This technique, known as blinded placement, resulted in a high click-through rate and low overall cost per click relative to other tactics. The blinded approach resulted in an average cost per click-through of $1.14 versus $17.70 per click-through for other, more direct, approaches. By measuring throughout a campaign, projects can test marketing channels and tactics and transfer funds to those with the best return for a given cost.

Effective wordsmithing. The project did head-to-head comparisons of the performance of the different ads. The most provocative one—highlighting significant C-section rate variations among nearby hospitals—was the most effective overall at generating traffic to CalHospitalCompare.org. This ad’s message had a call-to-action, challenging the consumer to “Find the best hospital for you.” In the test of various words in a search, specific hospital names brought the highest level of interest over more generic words like “C-section,” “maternity,” and “hospital ratings.”

Continuing investment. At the conclusion of the San Francisco campaign, traffic noticeably dropped. Though it had been anticipated that there would be residual traffic to the unique campaign pages if users had bookmarked the site following their first visit, this was found to be minimal. Since maternity is an episodic condition, the target audience is continually changing, with new women becoming pregnant and benefiting from access to hospital quality information.

Questions for Further Consideration
In addition to strongly affecting traffic in the target markets, the campaign created consistent traffic flow, avoiding the gradually diminishing returns that characterize some campaigns. The project demonstrated that advertising is an effective way to quickly increase awareness and use of hospital quality reports when the health condition is common, the relevant services are shoppable, and the target audience has the time and desire to research their options.

Not all related questions were answered by the campaign research, including:

- Will other search engines, like AOL or MSN, produce similar results as Yahoo and Google?
- Can other campaigns focused on different medical conditions and/or in different markets produce similar results?
Will consumers respond similarly to a campaign promoting a Web site on the quality of other health care choices, such as for physicians or health insurance policies?

Does a campaign focused on one condition also induce consumers to look for information about other conditions?

For organizations with limited budgets, how can these lessons be effectively adapted?

These questions suggest useful areas for further research in efforts to get health care quality information into the hands of consumers who will benefit from it.

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**About the Site**

CalHospitalCompare.org is one of the most comprehensive and frequently updated hospital report cards. Launched in 2007, the Web site provides health care consumers with information on clinical care quality, patient safety, and patient experience in 241 California hospitals that have volunteered to participate. It is updated quarterly. The project is the result of a partnership between three organizations dedicated to improving health care quality: the California HealthCare Foundation; the University of California, San Francisco Philip R. Lee Institute for Health Policy Studies; and the California Hospitals Assessment and Reporting Taskforce (CHART), a nonprofit public benefit corporation.

**About the Foundation**

The California HealthCare Foundation is an independent philanthropy committed to improving the way health care is delivered and financed in California. By promoting innovations in care and broader access to information, our goal is to ensure that all Californians can get the care they need, when they need it, at a price they can afford. For more information, visit [www.chcf.org](http://www.chcf.org).