

# **Long-Term Care Awareness Pilot Campaign**

## **Draft Strategic Communication Plan**

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## EXECUTIVE SUMMARY

### Purpose

This plan provides a proposed evidence-based strategic template for CMS' Long-Term Care Awareness Pilot Campaign effort. The plan identifies a potential national direction that will be tailored for local implementation through upcoming community site visit research. It argues for a strategic repositioning of long-term care and long-term care planning from concepts that evoke many disparate, often negative notions to a unified, positive concept normalized in the target audience's everyday lives.

### Proposed National Strategy

*Objective:* To increase consumer awareness of the need for advanced planning for long-term care

*Overall Strategy:* Reposition long-term care planning as preparation for a positive array of options that consumers need in enhancing independence and control as they age.

*Audiences:* People 55-70, incomes of \$39,999 and below; people 55-70, incomes \$40,000-90,000; and both audiences' key influencers. For full discussion on income segmentation, please see forthcoming memorandum providing detail.

*Message Strategy:* Core message tenants – 1) long-term care is more than what consumers think it is; 2) the future need for long-term care is very personal and very real, and 3) planning can make a difference.

*Campaign Sponsor:* Campaign associated with trusted source—Medicare, HHS, co-sponsoring with a trusted non-government local or national organization/agency

### Proposed Tactical Approach

*Phase One – Influencer Engagement:* Identify key local influencers (key community members who are in a position to sway or affect attitudes or behaviors) with national ties; motivate them to see long-term care planning as a value-added part of their business; ask them to actively engage consumers in planning discussions.

*Phase Two – Direct-to-Consumer:* Offer positive and urgent planning messages and a planning tool, encouraging consumers to contact campaign identified information sources and/or the influencers engaged through Phase One efforts.

### Budget Assumptions

Budget per market: \$1 million

### Next Steps

*Conduct Local Site Visit Research:* Begin refining campaign planning based on site visit findings.

*Create and Test Messages and Materials:* Create preliminary graphic images, messages, and collateral material to test with consumer and influencer audiences.

*Draft Pilot Implementation Plans:* Refine and map activities to audience segments, present final images, messages and materials and include measurable goals, timelines, people responsible for activities, budgets, and process evaluation techniques used in tracking the success of our efforts.

## INTRODUCTION

Building from a foundation of extensive exploratory and formative research, this plan provides a proposed strategy for CMS' Long-Term Care Awareness Pilot Campaign effort. The plan identifies a unified national direction and template that would be tailored for pilot implementation through the upcoming community site visit research. It argues for a strategic repositioning of long-term care in order to advise targeted populations on the urgent need for long-term care planning and to open them and their key influencers up to the promise of planning for the range of aging supports available in pilot communities.

This plan is divided into four major sections:

- 1) Proposed National Strategy – a description of the overall proposed campaign objective and key principles that would drive all pilot campaign efforts.
- 2) Proposed Tactical Approach – an overview of proposed, specific communication activities designed in support of the national strategy.
- 3) Budget Assumptions – a brief outline of the resources available in each pilot community and some of the costs associated with the various tactics proposed.
- 4) Next Steps – a discussion of the activities to be accomplished in translating the proposed national strategy into pilot site implementation plans.

## PROPOSED NATIONAL STRATEGY

### Objective

Key findings from the focus group research demonstrated that people 55-70 view themselves as aging vibrantly and dying quickly; they find the prospect of planning for long-term care depressing; they plan for others before planning for themselves; they conduct some aging planning (though they themselves may not define their actions as “planning”) regardless of income level but within their means; they see independence and control as major planning motivators; are somewhat familiar with long-term care and, in discussion, do not necessarily relate it to nursing homes. They are amenable to long-term care planning, when it is explained, and see the time near retirement or end of work life as an appropriate opening for reaching them.

Understanding this, our overall proposed objectives are:

- ◆ To expand consumer understanding of long-term care and redefine long-term care as the need for assistance or provision of care for persons who have experienced a loss of functional independence due to physical and/or cognitive impairment,
- ◆ Present the concept as a unified package with the options clearly defined and,
- ◆ Ultimately increase consumer awareness of the urgent need for advanced planning for long-term care through the completion of the first two objectives.

At the end of the campaign, we need to have moved the mindset of the consumer from negative perceptions of long-term care to ones that are more positive. We would also seek to show consumers the value and urgency of planning for long-term care.

### **Overall Strategy**

In order to achieve our objectives, the campaign would adopt a repositioning strategy designed to transform long-term care planning into the obtaining of information on a positive array of services and options that consumers will need in enhancing independence, control, and quality of life as they age. This strategy will require us to both outline the variety of long-term care services available and convince consumers that their future need for these services is very personal and very real. However, our focus group research has shown that consumers, in aided discussion, are open to an expanded, unified notion of long-term care beyond their currently held piecemeal concept. Our research also shows that people are willing to consider planning once they understand its relevance to their lives. Recent CMS focus groups conducted to identify better-suited names other than “long-term care” confirmed existing consumer awareness of long-term care, and furthermore revealed that consumers can offer no plausible alternative name that might be better recognized or accepted.

Our research suggests that the most effective way to begin to change consumers’ mindset is to reach them in their everyday lives, with relevant messages and tangible tools, delivered by credible sources. The research also supports the need to connect with the target consumer on a local level. Given this, we recommend identifying and working with the key consumer influencers and then leveraging a select group to help deliver our message to the consumer. This strategy would also involve supporting existing efforts and mobilizing local experts, depending on the level of development of long-term care options and resources within a community. Given the limited time and resources, we believe an influencer strategy is the best way to change consumer mindset because influencers can effectively counter myths and misperceptions; they add prestige to a message and they affect other influencers in the community.

More specifically, we recommend a two-phased approach to our influencer strategy:

- ◆ Phase One: Focus primarily on identifying and educating key influencers about the expanded definition of long-term care and long-term care options, the need to plan for long-term care; and the value of the campaign planning tool, for up to the first three months. While influencers would be local, we would also seek those that have national connections so as to maintain the broader scope of future CMS efforts related to long-term care. (Phase Two would leverage these influencers to reach the consumer). While the influencer campaign would be underway, execute targeted national media outreach and selected media partners to reach the consumer locally and begin to soften the market.
- ◆ Phase Two: Focus primarily on the consumer, using a mobilized group of influencers as ambassadors of the long-term care message. The influencers would reach the consumer both directly, through day-to-day business and special events, and indirectly, through a solid local media outreach program. Influencers would have been motivated to carry our message by an appeal to offering added value to their work and an understanding that our consumer outreach

effort will be designed to drive consumers to our engaged partners. During this phase, our media outreach will focus on emphasizing and disseminating a planning tool.

## **Key Implementation Components**

### Audiences

Based on the research to date, we recommend that the campaign target two consumer audiences: people aged 55-70 with lower incomes of \$39,999 and below, people 55-70 with incomes \$40,000-90,000, and key influencers of these groups. These two audience segments provide a basic starting point and may be further refined into potential sub-segments. One objective in our next steps will be to acquire a more robust understanding of any lifestyle-based segmentation that exists within the two groups. Furthermore, through the upcoming site visit research, we hope to gain a more solid sense of the non-financial long-term care planning options that might be available to people of lower incomes since preliminary research has already identified a number of innovative approaches for this group. However, while the two distinct consumer audiences will require different messages and communications channels, they share some common traits (current mindset, media habits, etc.). Both sets of consumers:

- ◆ currently work, but anticipate a leisurely retirement;
- ◆ are optimistic in general and feel mostly empowered;
- ◆ may volunteer, especially after retirement;
- ◆ view long-term care as a loss of independence and freedom and decrease in quality of life and think long-term care is expensive (e.g., insurance); and
- ◆ use the media, particularly television, as a source for information.

Below are preliminary profiles of the two main consumer audiences. The focus of the next stages of research will be on achieving a higher, more sophisticated level of segmentation of the audiences:

**Preliminary Profile: Consumers Aged 55-70, \$39,999 and below**

<p><b>What do they do? Values?</b></p> <ul style="list-style-type: none"> <li>◇ Appreciate family and the option of being near children or able to visit with children</li> <li>◇ Do not want to burden their children, though others expect their children to care for them</li> <li>◇ Find it difficult to discuss LTC with their children</li> <li>◇ Focus on the positive aspects of aging -- health, livelihood, and independence</li> </ul>	<p><b>Attitudes and Beliefs about LTC</b></p> <ul style="list-style-type: none"> <li>◇ Consider their own futures in terms of the paths of their relatives</li> <li>◇ Are realistic about aging, though some hope for a quick death</li> <li>◇ Reaction to LTC: loss of independence, exorbitant, unfeasible expense (long-term care insurance)</li> <li>◇ Excited by idea of LTC planning options within their means</li> </ul>
<p><b>How can we reach them and who are their influencers?</b></p> <ul style="list-style-type: none"> <li>◇ Target messages via television, radio, the work place, Social Security or other government offices, banks, churches, employers</li> <li>◇ Showcase testimonials of local heroes and peers</li> </ul>	<p><b>Have they planned?</b></p> <ul style="list-style-type: none"> <li>◇ Some have given planning thought, some are engaged in planning (e.g. moving closer to children)</li> <li>◇ Some consider retirement funds from work, other savings and stocks as planning</li> <li>◇ Some have sought power of attorney contracts and living wills, and/or moved to a warmer climate or one-level apartments</li> <li>◇ Many equate LTC with end-of-life care and planning</li> <li>◇ Many are or were caregivers for their own parents, which prompted thinking about their own future planning needs</li> </ul>

**Preliminary Profile: Consumers Aged 55-70, \$40,000-90,000**

<p><b>What do they do? Value?</b></p> <ul style="list-style-type: none"> <li>◇ Foresee leisurely retirement; travel; some part-time work</li> <li>◇ Are optimistic</li> <li>◇ Appreciate family and option of being near children or able to visit with children</li> <li>◇ Do not want to burden their children</li> <li>◇ Find it difficult to discuss LTC with their children</li> <li>◇ Focus on vibrant aging</li> <li>◇ Focus on maintenance of lifestyle; preserving assets</li> </ul>	<p><b>Attitudes and Beliefs about LTC</b></p> <ul style="list-style-type: none"> <li>◇ Have negative image of LTC, including association with death and dismal conditions in nursing homes</li> <li>◇ Associate with loss of independence and decrease in quality of life</li> <li>◇ Possess some knowledge of various components of LTC, LTC a fractured concept</li> <li>◇ Will consider an expanded definition of long-term care</li> <li>◇ Want a unified package</li> <li>◇ Consider their own futures in terms of the paths of their relatives</li> </ul>
<p><b>How can we reach them and who are the influencers?</b></p> <ul style="list-style-type: none"> <li>◇ Television, newspapers, radio, some Internet; magazines</li> <li>◇ Employers, unions, financial planners, attorneys, bankers, realtors, insurance agents</li> </ul>	<p><b>Have they planned?</b></p> <ul style="list-style-type: none"> <li>◇ Some have accumulated savings and/or planned financially</li> <li>◇ Some have purchased LTC insurance</li> <li>◇ Some have written wills and done estate planning</li> <li>◇ Some have made living/residential choices as they have aged</li> </ul>

**Influencers**

Our exploratory research suggests that consumers want to gain long-term care planning information from trusted community sources. Consistent with the Diffusion of Innovations Theory (Ryan & Gross, 1943 & 1950; Rogers, 1962 & 1983; and Valente, 1994), new behaviors, such as long-term care planning, will not automatically be adopted in a wholesale fashion by an entire community. Rather, key community members—called Early Adopters or Influencers—must first introduce the idea of planning to the marketplace. Influencers would be those who already have some previous experience with long-term care planning, see a need or problem with current planning approaches, find our planning solutions and planning guide innovative and valuable, and have both local and national connections. An influencer would be a person with the power to sway or affect attitude or behavior based on his/her prestige, wealth, ability or position. Influencers can be categorized into four primary sectors: Experts (those with professional training in the relevant category); Celebrities, who influence by virtue of their status, popularity or fame; Editors (relevant media); and Equals (peer leaders within a given target audience). Our exploratory research indicated that people would expect and prefer to hear messages about long-term care planning through their regular media channels (Editors), with particular emphasis on



television. The research also demonstrated consumer desire to obtain long-term care planning information from trusted professional advisers they have sought for other planning activities, such as financial planners (Experts). While these findings point to a recommendation for targeting Experts and Editors, community site visit efforts will fully determine the best influencers in each community.

### **Message Strategy**

In repositioning long-term care, we recommend the core tenants of our message communicate that long-term care is more than what consumers think it is, that their future need for long-term care is very personal and very real, and that planning can make a difference. Even though the campaign would target two distinct consumer audiences through selected key influencers, in order to ensure we successfully reposition long-term care, we would have to deliver a message that first expands the definition of long-term care beyond current consumer perception, presents the personal urgency and reality of the need, and then focuses on the benefits of long-term care planning. We would need to demonstrate the value of our message, thus making it relevant and attainable. Rather than focus on the complexities of long-term care, through our messages, we would want to show consumers that they can preserve their independence and control as they age by planning.

### **Campaign Sponsor**

The campaign would have to be associated with a strong sponsor to provide the credibility needed to shift influencer and consumer mindsets in the time available. Our research shows that consumers 55-70 can be skeptical about issues such as long-term care because of the heavy amount of existing aging-related marketing already aimed in their direction. If our campaign is perceived as just another ploy to part consumers with their money, then our messages will get lost in the substantial clutter.

A strong sponsor engenders immediate consumer trust and emotional connection. We recommend testing possible sponsors for the campaign during upcoming message and material research work. Options might be HHS, Medicare, possible co-branding with a trusted non-government local or national organization or agency, or development of a unique campaign brand. Information obtained through the site visit research will be critical in helping to solidly identify appropriate branding strategy. See forthcoming memorandum for full discussion on branding strategy.

## **PROPOSED TACTICAL APPROACH**

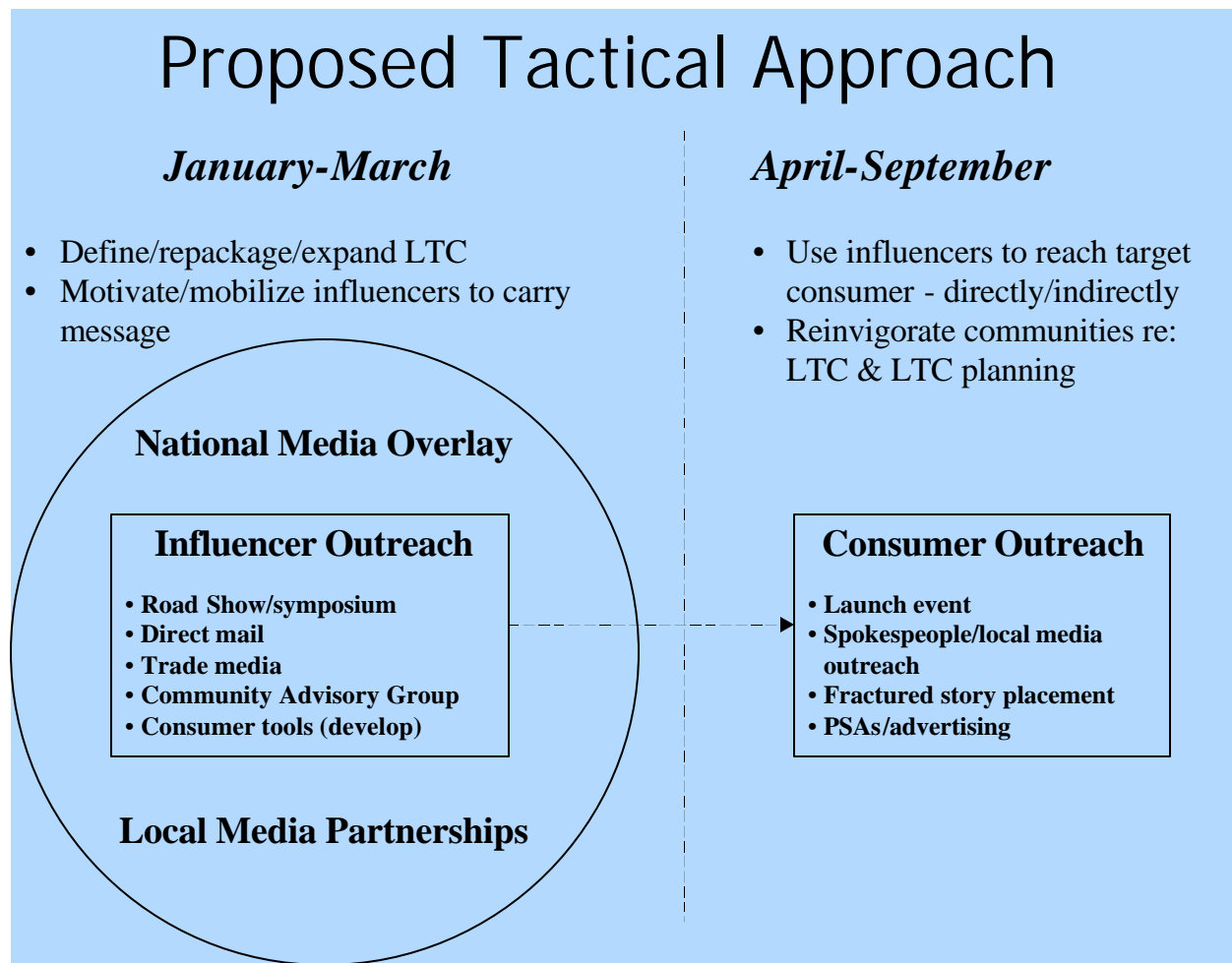
This section describes our proposed approach to implementing the LTC repositioning strategy in the pilot communities. This approach has two phases: Phase 1 would target key consumer influencers and Phase 2 would target consumers themselves.

We propose this strategy because our focus group research clearly showed that consumers can make a positive shift in their attitudes about long-term care planning when engaged in a

facilitated conversation about the topic. Consistent with Diffusion Theory, consumers also noted that they would like to obtain planning information from trusted sources with whom they already interface for other important information and advice. At the same time, our best practice research provides evidence that many key influencers are currently not communicating the full range of LTC possibilities to the public. Our repositioning effort would attempt to bridge this communication gap.

LTC is a daunting and seemingly unapproachably large issue to most consumers. Many find the subject depressing and often choose to avoid the issue. We believe that optimal use of project resources cannot rely solely on direct-to-consumer advertising. However, combining trusted sources of opinion with direct-to-consumer work offers promise in moving consumers toward a new way of thinking about, and planning for, long-term care. Figure 1 provides a model of our proposed two-phase approach.

**Figure 1 ---Proposed Tactical Approach**



We have proposed beginning the campaign by focusing on influencers because our research has shown that consumers easily ignore or deny the need for long-term care planning. Moreover, if long-term care planning were to become part of the regular discussions people have with their

key advisers, then it may become a more difficult step to dismiss. Furthermore, it would work to normalize long-term care planning within the context of other planning actions some people already take. There exists concern that consumers would be wary of messages from planning professionals because in prior research they have expressed distrust of parties who may be “trying to sell them something.” However, in the research consumers also recommended that long-term care planning messages be conveyed via their personal planning professionals at the same time that they would already be seeking advice on other planning matters. We believe that these seemingly contradictory statements can be reconciled by distinguishing between the wariness of “someone trying to sell something” and a consumer’s personal planner. Consumers who have sought out a planning professional have likely already invested trust in their personal planning advisers and therefore would more likely see this specific source as an appropriate communicator.

Additionally, if key advisers see long-term care planning as a value-added part of their business and service mission, they would be motivated to actively engage consumers in planning discussions. Other influencers would be further motivated by the prospect of Phase 2 direct-to-consumer promotion that could drive business their way, or could eventually promote productivity in the workplace by potentially providing relief for informal caregivers.

Due to the proposed focus of Phase 1 of the campaign on key influencers, it would be imperative to ensure the cooperation of the influencers of our target audience. The first critical step in this direction would comprise extensive visits to each one of the pilot sites in order to establish contacts within the long-term care influencer communities through several highly-inclusive group listening sessions. Upon conclusion of the initial round of site visits, the team would continue to cultivate key relationships with identified leaders within the influencer communities. Throughout the duration of the campaign, the team would seek their cooperation and aid in maintaining the delivery of clear and consistent influencer messages. Once influencers are sufficiently engaged and prepared, we would begin Phase 2 efforts targeted directly at our consumer audiences. Plans for Phase 2 offer positive planning messages that would encourage consumers to seek additional planning information and/or contact the influencers we would have engaged through Phase 1 efforts. Phase 2 would also include large-scale promotional efforts, as well as attendant policy education work that would seek to engage entire communities around long-term care and long-term care planning.

The sections below offer detailed outlines of Phase 1 and Phase 2 plans. Each section begins by answering the key marketing questions that inform our approach. The sections end with examples of the kinds of tactics that can be implemented in reaching our awareness objective through a long-term care repositioning strategy. It is important to note that our mandate is to create an evidence-based campaign, thus our approach reflects widely-proven communications tactics that have been reaffirmed by our national exploratory research.

**Phase One -- Influencer Engagement**

**Potential Targets (including, but not limited to):** Media, Workplace, Unions, Religious, Political, Business, Housing Leaders, Community Service Organizations, Aging Networks, Doctors, Health Providers, Financial Planners, Attorneys, Bankers, Insurance Agents, YWCA/YMCAs, GED Classes, Social Workers, Community Action Programs, Educational Institutions.

**Timeframe: October 2001 to March 2002**

**Key Marketing Questions**

<i>Action</i>	<b>What do we want them to do?</b>	<ul style="list-style-type: none"> <li>◇ Understand the range of LTC service</li> <li>◇ Encourage clients to plan</li> <li>◇ Be prepared to answer client questions</li> <li>◇ Be an ambassador of our message</li> <li>◇ Distribute campaign material</li> </ul>
<i>Rewards</i>	<b>What do they get out of it?</b>	<ul style="list-style-type: none"> <li>◇ Value-added service to customers</li> <li>◇ Avoidance of embarrassment of being unprepared on long-term care information highlighted by campaign</li> <li>◇ Avoidance of potential complaints, litigation</li> <li>◇ Potential business contacts</li> <li>◇ Customer, employee satisfaction</li> <li>◇ Increased employee productivity</li> <li>◇ Visibility</li> </ul>
<i>Supports</i>	<b>What will make the message credible?</b>	<ul style="list-style-type: none"> <li>◇ Endorsement by national leadership of corporations, associations, unions</li> <li>◇ Endorsement by HHS Leadership</li> <li>◇ Reporting in national media and trade press</li> </ul>
<i>Image</i>	<b>What will appeal to our audience?</b>	<ul style="list-style-type: none"> <li>◇ Facts they need to know to help clients and build business/services</li> <li>◇ Sophisticated, credible tools that can be given to clients</li> <li>◇ Opportunity to co-brand</li> </ul>
<i>Openings</i>	<b>How can we reach them?</b>	<ul style="list-style-type: none"> <li>◇ Appeal to changes in economy/need to add to business</li> <li>◇ Appeal to market's call for increased customer/employee satisfaction</li> <li>◇ Appeal to need to market underutilized community services/agencies</li> </ul>

### Sample Tactical Options

Timeframe	Program Element	Description
September 2001	Community Briefing Kit	<ul style="list-style-type: none"> <li>◇ Develop initial engagement materials</li> </ul>
October – December 2001	Influencer Engagement	<ul style="list-style-type: none"> <li>◇ Identify local organizations/leaders with national ties</li> <li>◇ Conduct meetings, desk side briefings and interviews to learn local climate and experiences conducting campaigns</li> <li>◇ Share project goals; identify interface opportunities between their work and campaign</li> <li>◇ Analyze results of meetings/interviews</li> <li>◇ Draft site-specific plans for coordinating with local organizations/leaders</li> <li>◇ Conduct follow-up visits to roll-out plan and maintain local involvement and support</li> <li>◇ Possible trade advertising to obtain support</li> </ul>
October – December 2001	Media Partnership Development	<ul style="list-style-type: none"> <li>◇ Research appropriate television, print and radio outlets in each market</li> <li>◇ Develop localized partnership opportunities to offer each outlet (based on their needs, audience, etc.)</li> <li>◇ Identify and contact a specific person at each outlet (e.g. news director, general manager or editor)</li> <li>◇ Prepare localized materials to send to outlets, including background materials on campaign, "why they should get involved" letter, potential partnership activities and a pledge form to sign when becoming a partner</li> <li>◇ Arrange meetings to discuss and finalize partnerships</li> <li>◇ Explore national partnership with the National Association of Broadcasters (NAB)</li> </ul>
October 2001 – March 2002	Local, State Policy Maker Briefings	<ul style="list-style-type: none"> <li>◇ Identify local officials actively involved in long-term care issues or who have been personally affected by long-term care</li> <li>◇ Conduct meetings and interviews with identified officials to ascertain their background on the long-term care issue</li> <li>◇ Share the goals and objectives of the campaign and get their input</li> <li>◇ Recruit involvement in campaign including participating in events, media interviews and policy related activities</li> </ul>
October – December	Collateral	<ul style="list-style-type: none"> <li>◇ Create audience specific tool kits and how-to</li> </ul>

2001	Materials	information discussing long-term care planning and options
October – December 2001	Develop National Media Strategy	<ul style="list-style-type: none"> <li>◇ Construct database of potential media outlets, including key contact information and inside sources</li> <li>◇ Develop long-term care planning story angles to pique interest among journalists</li> <li>◇ Identify media outlet/message specific spokespeople (influencers, CMS, other)</li> <li>◇ Develop necessary support materials, including biographies, pitch letters and fact sheets</li> <li>◇ Place stories in longer lead and trade media outlets to ensure story placement concurs with program launch (magazines usually work 3-4 months in advance)</li> </ul>
January – March 2002	Road Shows	<ul style="list-style-type: none"> <li>◇ Educate and sell selected influencers expanded definition and purpose of the campaign and secure support for consumer campaign</li> <li>◇ Hold regular individual or small group meetings to further solicit support</li> <li>◇ Audit influencer materials and local “hero” stories and obtain input for targeted additional consumer materials</li> <li>◇ Leverage HHS and other credible spokespeople to secure meetings and add excitement to the Campaign</li> </ul>
February – March 2002	Spokesperson Training	<ul style="list-style-type: none"> <li>◇ Train select group of influencers for use in consumer campaign</li> <li>◇ Identify audience(s) and refine messages, make the story/presentation compelling, avoid interview or Q&amp;A traps, pre-empting negative issues with positive messages</li> </ul>
January – May 2002	National Media Implementation	<ul style="list-style-type: none"> <li>◇ Work closely with national media outlets to place stories that communicate our key messages to reach our influencers, soften the consumer market, and add credibility locally</li> <li>◇ Suggested targets: Today Show, Good Morning America, The Early Show, NBC Nightly News, ABC World News Tonight, CBS Evening News, 60 Minutes, 20/20, <i>USA Today</i>, <i>Ladies Home Journal</i>, <i>Good Housekeeping</i>, <i>Ebony</i>, <i>Jet</i>, <i>Prevention</i>, <i>Money</i>, <i>Reader's Digest</i>, <i>Parade</i>, <i>USA Weekend</i>, NPR, possible prime time program placement (e.g. West Wing)</li> <li>◇ Long-term care planning chronicled stories</li> </ul>

<p>January – May 2002</p>	<p>Local Media Partnership Implementation</p>	<ul style="list-style-type: none"> <li>◇ Regularly schedule interviews on long-term care issues with key spokespeople</li> <li>◇ Contribute to weekly/monthly program/article dedicated to long-term care issues</li> <li>◇ Establish Web links between outlet's site and CMS site for information on myths/facts about long-term care</li> <li>◇ Work with partners to develop PSAs (paid for by the media outlet) that highlight long-term care message</li> <li>◇ Sponsor and publicize events in communities (i.e. planning fairs)</li> </ul>
<p>January – September 2002</p>	<p>Community Advisory Committee</p>	<ul style="list-style-type: none"> <li>◇ Encourage influencers to form local community group to plan sustainable action</li> <li>◇ Participants: key local officials and intermediaries would be involved throughout the campaign process</li> </ul>

By the beginning of March 2002, the team would have fully engaged influencers and primed the consumer market with key messages. Therefore, from March until September, the main focus of the pilot program would be to mobilize the influencers to help directly and indirectly reach our target audience. In addition, the team would conduct an aggressive local media outreach campaign to further cement the messages in the minds of the consumer, and thus begin to change their mindset toward long-term care.

In addition, with one of the possible outcomes of this pilot program being an ability to create sustainable change, we would consider working to implement select policy-related programs during this phase of the campaign, where appropriate.

**Phase Two -- Consumer Engagement**

<p><b>Targets:</b> Consumers ages 55-70, \$39,999 and below</p>		
<p>Consumers ages 55-70, \$40,000-90,000</p>		
<p><b>Timeframe:</b> April 2002 to September 2002</p>		
<p><b>Key Marketing Questions</b></p>		
<p><i>Action</i></p>	<p><b>What do we want them to do?</b></p>	<ul style="list-style-type: none"> <li>◇ Be aware of an expanded definition of long-term care</li> <li>◇ Know how to obtain additional planning information</li> <li>◇ Call for a Medicare-approved planning tool</li> <li>◇ Talk with an expert in a chosen field of interest (Either for themselves or for their loved ones who may need long-term care at</li> </ul>

		<p>some time)</p> <ul style="list-style-type: none"> <li>◇ Attend a class on long-term care planning</li> <li>◇ Talk with loved ones, if appropriate</li> </ul>
<b>Rewards</b>	<b>What do they get out of it?</b>	<ul style="list-style-type: none"> <li>◇ Independence</li> <li>◇ Control</li> <li>◇ Self-efficacy</li> <li>◇ Quality of life that they have control over</li> <li>◇ Comfortable lifestyle for a loved one who may need LTC</li> <li>◇ Smoother aging transition for selves and loved ones</li> </ul>
<b>Supports</b>	<b>What will make the message credible?</b>	<ul style="list-style-type: none"> <li>◇ Examples of successful planning from local peers (for each income bracket), testimonials</li> <li>◇ Planning that can be feasibly duplicated (for each income bracket)</li> <li>◇ Support from local influencers</li> <li>◇ Local heroes</li> </ul>
<b>Image</b>	<b>What will appeal to our audience?</b>	<ul style="list-style-type: none"> <li>◇ Vibrant image with a positive tone</li> <li>◇ Peers within the 55-70 year old age range</li> <li>◇ Possibilities for health and livelihood</li> <li>◇ Avoid sickness or weakness</li> <li>◇ Avoid scare tactics or coercive messages</li> </ul>
<b>Openings</b>	<b>How can we reach them?</b>	<ul style="list-style-type: none"> <li>◇ Appeal to consumers planning retirement (middle-upper income)</li> <li>◇ Appeal to consumers considering a reduction in full-time employment (lower income)</li> <li>◇ Appeal to those thinking about positive aging. (Based on focus group feedback, low-income consumers may not be considering retirement, but may instead think about what will happen as they age.)</li> <li>◇ Appeal to informal caregivers who may value planning for themselves before a crisis</li> <li>◇ Appeal to the collective aging of the baby boomers</li> <li>◇ Appeal to the preference to plan for others</li> <li>◇ Repeat messaging</li> </ul>



### Sample Tactical Options

Timeframe	Program Element	Description
April 2002	Aging Independence Day Launch Event	<ul style="list-style-type: none"> <li>◇ Local heroes and spokespeople (and possible HHS representatives)</li> <li>◇ Launch the “call to action,” planning tool, and Long Term Catalyst Award program</li> <li>◇ Coordinate with local charity</li> <li>◇ Invite local media to attend</li> </ul>
April – September 2002	Long-Term Care Catalyst Award Program	<ul style="list-style-type: none"> <li>◇ Identify and call for nominations for local people who inspire change and make long-term care planning a cause</li> <li>◇ Awardees can be influencers or consumers</li> <li>◇ Award ceremony held at campaign wrap-up event</li> </ul>
April – September 2002	Spokespeople mobilization	<ul style="list-style-type: none"> <li>◇ Media outreach, seminars, signature direct mail</li> <li>◇ Leverage “local heroes” and real life long-term care success stories</li> </ul>
April – September 2002	Local Media Campaign	<ul style="list-style-type: none"> <li>◇ Outlet specific pitching: identify compelling story angles for each media</li> <li>◇ Local long-term care planning chronicled stories</li> </ul>
April – September 2002	Public Service Announcements	<ul style="list-style-type: none"> <li>◇ Place print public service announcements in daily and weekly papers, long-lead publications and trade outlets</li> <li>◇ Development would include graphic development, production and distribution to media outlets</li> </ul>
April – September 2002	Special Events	<ul style="list-style-type: none"> <li>◇ Christmas in April or "Elder Hammers" – create an event where people can help retrofit an older person's home. Get Home Depot or Lowe's and a media partner to sponsor the event</li> <li>◇ Parade of Homes Tour – partner with local architects to retrofit a home and get it on the annual Parade of Homes tour</li> <li>◇ Provider Tour – partner with area long-term care providers for an "open-house" day for consumers to visit and learn more about long-term care options and facilities</li> <li>◇ Trade Shows – research local health and home shows and create booth focused on long-term care planning</li> <li>◇ Showcase Assistive Devices</li> </ul>
April – September 2002	Material Distribution	<ul style="list-style-type: none"> <li>◇ Several options: including a toll-free number, Web site, direct mail and long-term care planning tool distribution at events and meetings</li> </ul>

May – August 2002	Planning Fairs	<ul style="list-style-type: none"> <li>◇ Educate consumers about planning options</li> <li>◇ Include booths from traditional long-term care providers and key planning services (e.g. nursing homes and in-home services as well as less traditional providers like contractors, architects, financial and estate planners.)</li> <li>◇ Key influencers could also conduct seminars and speeches at the fair to further educate consumers.</li> <li>◇ Possible local media partner sponsorship, media coverage, direct mail and local advertising</li> </ul>
August – September 2002	Community Planning Day Event	<ul style="list-style-type: none"> <li>◇ Secure city-wide holiday declaration for “long-term care” planning</li> <li>◇ Propose key employers sponsor planning sessions</li> <li>◇ Host event to announce long-term care catalyst winners and future activities</li> </ul>
August - September 2002	Legislative Day	<ul style="list-style-type: none"> <li>◇ Designate day to educate policy-makers about the importance of considering the long-term care needs of a community</li> <li>◇ Meet with local delegations to discuss their communities long-term care needs, passing out information and hosting events</li> </ul>

### BUDGET ASSUMPTIONS

Based on our research and the objectives that need to be achieved, at this time we estimate spending approximately \$1 million per market between October 2001 and September 2002. Below are budget estimates for selected campaign direct costs. Detailed budgets will be submitted with forthcoming local implementation plans.

#### Selected Campaign Direct Costs

Description	Estimated ODCs
Collateral Materials	\$45,000
VNR/PSAs/B-roll	\$125,000-\$150,000
ANRs	\$12,000
Trade and selected local advertising	\$200,000
Consumer Planning Fairs	\$90,000
Cable TV Advertisement Placement	\$46,000 per week
Consumer Events	\$125,000
Direct Mail	\$75,000
Toll-Free Number/Distribution	\$125,000
Influencer Events	\$40,000
Influencer Tool Kit	\$25,000
Radio Advertisement Placement	\$45,000 per week @ 200 pts.

## NEXT STEPS

In translating the proposed national strategy into pilot campaign efforts, there are several critical next step activities to undertake.

- 1) **Conduct Local Site Visit Research (Oct.-Nov. 2001)** – Over the coming weeks the project team will visit the pilot site communities to gauge how well the national strategy coordinates at the local level. We will meet with the wide range of potential local partners, explore media outlets, and begin refining campaign planning.
- 2) **Create and Test Messages and Materials (Oct. 2001-Jan. 2002)** – Site visit meetings will offer a solid sense of the kinds of messages and materials that may be needed for our campaign. Soon after this research, we will create preliminary graphic images, messages, and collateral material that can be tested with consumer and influencer audiences.
- 3) **Draft Pilot Implementation Plans (Nov.-Dec. 2001)** – Next step activities will culminate with the creation of pilot site specific implementation plans. These plans will outline the campaign activities to be conducted in each market. The plans will refine and map activities to audience segments, present final images, messages and materials and include measurable goals, timelines, people responsible for activities, budgets, and process evaluation techniques used in tracking the success of our efforts.