Marketing & Business Development
In Support of Monetizing for Sustainability

Presented by Nancy Connelly
Director, Strategic Development
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Current Portfolio of Offerings

SMAA chose to create offerings in 3 categories

- **Healthcare**
  - Simply Delivered Meals, EBPs, Resource Specialist, Medicare Education Programs

- **Businesses**
  - Lunch & Learns- Medicare, Caregiver Programs, General Information, Resource Coordinator
  - Supports employees and often businesses’ clients (banks, financial investment firms, residential complexes)

- **Municipalities**
  - On-site resource coordinator, EBPs, Medicare and other programs on-site within the community
  - Planning on adding volunteer training services in very near future
Steps in Monetizing for Sustainability

• Developed product offerings based on expertise and marketplace need-SMAA Signature Services
• Conducted focus groups with healthcare and businesses
• Created marketing materials for promotional purposes (sell sheets, case studies, supportive articles/studies, published article, website www.smaaaacbo.org, )
• Developed prospects based on organizational contacts and new outreach
• Helped the organization learn to channel incoming opportunities to business development for fee or suggested donation discussions
• Routinely focus on sales calls based on 3 prong strategy
• Utilize contracting skills and measure/report results routinely
• Adjust product offerings based on learning and market response
Progress to Date

Business in all 3 categories

- **Healthcare (3 active contracts, 1 in negotiation, 1 completed contract)**
  - Contracts with hospitals for EBP, Medicare Programs, Advance Care Planning
  - Resource coordinator for large medical practice
  - Resource coordinator supporting a healthcare business
  - Working on proposals/discussions for post-discharge meals and falls prevention w/insurers

- **Municipalities (1 active contract, with additional seminar delivery programs)**
  - Heavy emphasis on aging in place efforts, collaborate with AARP
  - On-site Community Resource Coordinator (2 different towns)
  - EBP, ACP, and Medicare Programs
  - Working on adding volunteer training programs

- **Businesses (1 active contract, with many additional seminar delivery programs)**
  - On-site resource specialist in residential complex
  - 25-30 seminars delivered to businesses for their employees or customers (caregiver, Medicare)

**Business is building over time**

- Approx. $120K in revenue contribution for current fiscal year (year 2 of our focused effort)
- $100K contracted revenue at the outset of the new fiscal year, with new contracts expected
Considerations for the Organization

• Readiness of the organization to handle additional work-load/capacity
  – Manpower, infrastructure
• Need to centralize business development discussions, contracting and invoicing with consistent messaging and purpose making SMAA more impactful with third parties
• Shifting of mindset from “no charge” to donation and fee for service contracting to extend the reach and sustainability of programs
• To prevent internal conflict will need to create an understanding around the prioritization of which services/offerings are promoted first based on org. readiness, org. strategy
• Create an understanding within the org. of how additional revenue will be used....to sustain individual programs or across programs (i.e. will Simply Delivered Revenue go only to the SD Program or to meet cross org. needs?)
Summary of Best Practices

• Need to think about product development- what do you do well that other organizations might pay for, might require adapting or adjusting the service offering
• Need to put on a new marketing hat, credentialing the organization as experts in the field of aging or other area in support of the full community (people and organizations-healthcare, municipalities & businesses)
• For us the greatest fee for service financial opportunity exists in healthcare but it is also the most competitive with a long selling cycle-need to prioritize selling efforts
• Longevity of most programs depends on pull-through, getting the customer to use it and the ability to remain in front of the customer presenting outcomes/results
• Internally there are some cultural and capacity considerations as the organization moves in the direction of monetizing for sustainability
• Understanding program/organizational costs ensures pricing of offerings will deliver value into the organization
• Need to be sure offerings are financially competitive in the market place
• Offerings don’t need to be 100% financially sustainable from fee for service revenue, may be supported by multiple sources (grants, fee for service and government)
• Utilize grants/government funding to build capabilities and capacity while planning for sustainability at the outset.
• Begin fee for service for new offerings early on. Don’t wait too long for the community to become accustomed to a free or donation only service
Healthcare Marketing
Your referral means the world to your patient and their caregiver.
Simply Delivered Meals
A Tale of Collaboration

- Published article in the American Journal of Managed Care, June 2016 (Trends from the Field)
- Based on successful pilot with MMC providing 7 home delivered meals to 622 high risk patients discharged from the hospital in conjunction with Continued Care Transition Program.
- Results included
  - 2 point reduction in 30-day readmission rate compared with CCTP only (no meals)
  - 387% return on investment
SIMPLY DELIVERED MEALS

- Nutritionally balanced, **33% of caloric requirements**
- Comfort food, heart healthy, diabetic friendly, renal friendly, pureed, gluten free, and vegetarian options
- Maine sourced produce, flash frozen for freshness
- Easily heated in microwave or oven on-demand, can also be provided for caregiver
- Available for purchase by patients, delivered directly to the home $7.00 per meal, sold in packs of 7 or more

*This service was a life saver for me and my wife while she was regaining her strength and mobility*”
NUTRITIONAL GUIDELINES

- **Heart Friendly**: 700mg or less of sodium, less than 30% of calories from fat, less than 10g of saturated fat. Meals meet the American Heart Association Guidelines.
- **Diabetic Friendly**: 70g or less of carbohydrates per entrée. Meals are designed to promote and support healthy eating patterns based upon the recommendations of the American Diabetes Association.
- **Renal Friendly**: 700mg or less of sodium, 650mg or less of potassium. For patients on hemodialysis, home dialysis or peritoneal dialysis.
- **Gluten Free**: Contains no gluten, wheat or related grains. ELISA tested to meet Federal requirements of less than 20ppm of gluten per meal.
- **Vegetarian**: Includes no pork, beef, chicken or fish. May include eggs or dairy.
- **Pureed**: Meals designed for those with difficulty swallowing.
- **Low Sodium**: 140mg or less of sodium per 100g.
- **Low Fat**: 3g or less of fat per 100g and not more than 30% calories from fat.
- **Low Saturated Fat**: 1g or less per 100g and no more than 10% of calories from saturated fat.
- **Low Cholesterol**: 20mg or less per 100g.

SAMPLE MEALS

- Salisbury Steak with Onion Gravy
- Chicken Pot Pie
- Pasta Shells with Italian Turkey Sausage
- Orange Glazed Chicken Shells & Cheese
- Meatballs with Stout & Mustard Thyme Sauce
- BBQ Pork
- Pork with Apple & Onion Sauce
- Ham & Pineapple
- Baked Beans & Hot Dogs
- Colby Cheese Omelet
- French Toast
Falls Prevention

- A Matter of Balance (MOB) is an evidence-based program with proven results.
- The program’s goal is to reduce fear of falling, stop the fear of falling cycle, and increase activity levels among community-dwelling older adults.
- The program acknowledges the risk of falling but emphasizes practical coping strategies to reduce this fear. These include:
  - Promoting a view of falls and fear of falling as controllable
  - Setting realistic goals for increasing activity
  - Changing the environment to reduce fall risk factors
  - Promoting exercise to increase strength and balance.
- Meetings are led by coaches. A Master Trainer is responsible for teaching the Matter of Balance curriculum to the coaches, providing them with guidance, a coach observation visit, and support as they lead the Matter of Balance classes.

- A Guest Healthcare Professional visit to the community class is frequently arranged (RN/OT).
- Patients may be referred through (MaineCommunityLinks.org)
  - Participant donation of $30 is requested, no one is denied based on ability to pay
  - SMAA is in conversations with insurers for future reimbursement strategy.
• Easy to use Web link for medical professional referrals of patients in need of SMAA Signature Services and Assistance
• HIPAA Compliant, no patient records required, no diagnosis, no prescription necessary
• Patient consents to being contacted
• SMAA reaches out to patient to activate referral