The effects of print advertising campaigns on consumers' attitudes towards physician primary care practices affiliated with Jefferson Health System

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The Effects of Print Advertising Campaigns on Consumers' Attitudes
Towards Physician Primary Care Practices Affiliated
with Jefferson Health System

by
Maryann LoBianco

A Thesis
Submitted in partial fulfillment of the requirements of the
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Approved by______________________________

Date Approved__________________________
ABSTRACT

Maryann LoBianco

The Effects of Print Advertising Campaigns on Consumers’ Attitudes Towards Physician Primary Care Practices Affiliated with the Jefferson Health System 1997

Dr. Steven Shapiro
Corporate Public Relations

Due to managed care, the recent, rapid changes in healthcare forced hospitals to form health systems by joining with other hospitals and individual physician practices. As these health systems form, the competition for patients increases as does the need to keep consumers abreast of the changes within the forming health systems.

As a result, both health systems and physician practices launched advertising campaigns to reach these consumers. These campaigns must be tested for their effectiveness.

Two major healthcare competitors, Jefferson Health System and Main Line Health System, recently affiliated and formed Great Valley Health, which is a physician primary care group practice in the Main Line area of the Philadelphia suburbs.

A focus group of 10 men and women who live on the Main Line was conducted to determine their awareness and reactions to Great Valley Health
primary care practices and Jefferson Health System primary care practices.

According to this research, even though current Jefferson advertising campaigns are effective, Main Line consumers are somewhat confused by what Great Valley Health is and its relationship to the Jefferson Health System.
MINI-ABSTRACT

Maryann LoBianco

The Effects of Print Advertising Campaigns on Consumers' Attitudes Towards Physician Primary Care Practices Affiliated with the Jefferson Health System 1997

Dr. Steven Shapiro
Corporate Public Relations

Jefferson Health System conducted a focus group to evaluate Main Line consumers' perceptions of print advertising for physician primary care practices.

Even though advertisements for Jefferson primary care physicians are effective, consumers are confused by Great Valley Health, which is a Jefferson primary care group practice on the Main Line.
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Recent Changes in the Healthcare Industry

During the past several years, healthcare has experienced dramatic changes due to rising costs and because of the influence of managed care, a concept introduced to reduce these costs. These changes affected physicians, patients and hospitals both financially and in the manner in which care is provided.

Managed care is a health plan which allows consumers to participate at a reduced cost when compared to traditional fee-for-service health plans such as Blue Cross/Blue Shield. With managed care, physicians are paid a monthly fee for each patient who participates in the plan.

For example, a patient may visit his or her physician one time during one month and five times during another month. No matter how many times the patient visits his or her physician, the physician still receives the same monthly fee. This is known as capitation and it differs from fee-for-service plans in which physicians are paid for each visit and for each service they provide.
Due to capitation by managed care organizations, physicians are now forced to provide less care than they might like to in some cases and patients are left hoping that a missed diagnosis or treatment of a serious illness will not occur. The reason is that if a managed care organization thinks that a physician is over-treating a patient, that physician may be scrutinized and questioned about the services provided.

Because of managed care and cuts in Medicare/Medicaid reimbursements, hospitals were forced to lay off employees and restructure/re-engineer the way they operate.

As a result, the focus shifted to patients, who are those with the most at stake. In addition to their well-being, hospitals and physicians alike must be concerned about patient satisfaction. In the competitive healthcare environment, if patients are not happy with one hospital or physician, they may choose another.

Also, the focus has shifted to primary care physicians who are the gatekeepers in the managed care health system. To receive medical coverage, patients must see their primary care physician for a referral to a specialist before they can see that specialist.

In addition to providing quality healthcare, hospitals must make patients aware of the care and services they provide. While word of mouth is a powerful conduit of this information, comprehensive marketing and advertising campaigns are a way to get a specific message to a specific audience.
This thesis is based on a focus group study of the effectiveness of print advertising materials on a selected target audience. The following is background on a previous focus group conducted at Thomas Jefferson University Hospital of the Jefferson Health System and some of the key results of the study.

The information is provided to help explain how focus groups are conducted and why they are useful in hospital/patient care settings.

A Cardiac Care Focus Group Study at Jefferson

In a focus group study of cardiac patients conducted for Thomas Jefferson University Hospital, Philadelphia, Pa., research showed that respondents with cardiologists obtained them primarily through referrals from their family doctors, through a visit to an emergency room or through the referrals of friends and relatives.¹

When shown advertising materials designed to be a consumer’s guide to cardiac care services at Jefferson, the majority of respondents were not interested in receiving the information.¹

Rather, respondents were satisfied with where they were and pleased with the way things were done at the hospitals they visit. These cardiac patients did not want to make a change, but wished to continue on their current path and with their current doctors and hospitals.¹

In the study, it was interesting to note that these respondents cling to what they have and know rather than expose themselves to information that might lead
them to make a new and possibly better selection for fear that it might be worse than their current care.¹

This focus group also revealed that patients were most interested in wellness education. Respondents said they would be most interested in a cardiac care brochure that: listed heart disease symptoms, gave tips and advice on eating in a heart-healthy manner, gave advice on shopping for groceries with information on how to read and interpret food product labeling, gave information on side effects of different heart medications and presented a list of criteria to look for when selecting a cardiologist.¹

This study reveals that advertising is still an effective way to reach potential patient populations in the Philadelphia region. However, the manner in which the information is presented is the key to how effective the advertising campaign is.

Why Qualitative Research is Effective

Qualitative research, even though it may not represent the population at large, is being used with increasing frequency in the health and human service fields.²³ Focus groups tend to be cost effective, relatively easy to conduct, and are a quick way to obtain valuable information regarding an area of study.⁴

This approach is especially suited to research questions that seek to understand or uncover such processes as how health professionals make decisions or how individuals experience different disease processes or disabilities.⁴
Also, interpretations from one focus group can be confirmed and refined in a subsequent focus group. In addition, interesting insights or conflicting stories can be identified by the investigators and then pursued in the next focus group session. Thus, the analytic process is often incremental and builds from one group to the next.

The direct involvement of the investigator and other members of a research team provide consistency in interpretations and a mechanism to confirm emerging interpretations. The final analytic strategy may involve both a qualitative, thematic approach and then a content analysis in which specific use of words or response patterns are counted.4

It is important to note that all qualitative research such as focus groups may not be generalized with statistical confidence to the populations at large. Rather, it should be viewed as a hypothesis, providing a thorough understanding of how and why respondents feel and react as they do.

**Patient Satisfaction**

In this highly competitive healthcare environment, patient satisfaction is crucial. Their experience with illness and healthcare critically affects how they use healthcare services and how much they benefit from them. Hospitals can not build trust or confidence with patients if their needs are not met and understood.

Hospitals need to keep abreast of systematic, appropriate and effective ways to ask patients what they need, expect and experience. This information
should be used to shape and improve healthcare delivery. This understanding should be at the individual level at each clinical encounter throughout the institution as a whole.

Conducting focus groups not only gives feedback about the advertising of specific products or services, but can reveal what patients think in terms of the quality and level of care at the hospital conducting the research as well as its competitors. Focus groups can give insights to more than just advertising campaigns and can serve many purposes.

**Conclusion to Background**

To this end, there are many ways to elicit feedback from patients. In addition to focus groups, other examples include one-on-one interviews and polls or surveys. Expertise for this type of research can combine experience in communications, social marketing and social science research. The research in this thesis will examine one method in particular--the focus group.

For this thesis, a market research study was conducted by the Jefferson Health System (includes Thomas Jefferson University Hospital and the Main Line Health System, in addition to other hospitals that joined the system) for its primary care physician practices located in the Main Line area of the Philadelphia suburbs. The group practice is called Great Valley Health and consists of physicians affiliated with the Main Line Health System (includes Bryn Mawr Hospital, Lankenau Hospital, Paoli Memorial Hospital and Bryn Mawr Rehab).
Jefferson Health System physician practices not associated with Great Valley Health were also included in this research.

The reasons for this particular focus group are three-fold: 1) to evaluate Main Line consumers’ perceptions of print advertising for the primary care physician services provided by Great Valley Health and a leading competitor, 2) as a comparison to previous focus group research on Great Valley Health, and 3) to evaluate reactions to advertising for other Jefferson Health System primary care physician practices.

The previous focus group, “Main Line Respondents’ Reactions to the Great Valley Health Print Ad, ‘Signs of a Healthy Neighborhood,’” was tested three months prior to the more recent research used for this thesis. This focus group was conducted strictly to find out respondents’ reactions to this particular advertisement.

In this previous research, none of the respondents saw the advertisement prior to the focus group. After reading it at the session, respondents expressed confusion with the advertisement and did not find it appealing for several reasons.5 (See Appendix A)

Overall, the location of the doctors’ offices (Wynnewood, Pa., and Philadelphia) featured in the advertisement were considered far from Great Valley, which is perceived to be in the Paoli area of the Philadelphia suburbs.5
Also, the advertisement appeared cluttered and crowded, the doctors were not from respondents' neighborhoods and the respondents were confused about what Great Valley Health is and its connection to the Main Line Health System.5

Further, respondents thought it was strange that only Lankenau Hospital was mentioned, even though other Main Line Health System hospitals were indicated. Respondents also preferred to see affiliated hospitals listed and not individual physicians.5

Since the results of this focus group were not encouraging, further research was recommended for Great Valley Health advertising campaigns and their effects on Main Line residents.

A subsequent focus group, which is the basis of this thesis, was conducted to evaluate Main Line consumers' perceptions of print advertisements for primary care physician services provided by Great Valley Health and Jefferson Health System. The research also compared their effectiveness against print advertisements for a leading competitor.

This qualitative research also was designed to determine awareness and perceptions of Great Valley Health and to gauge reactions to services Great Valley Health may provide such as health fairs and reminder post cards.
Chapter Two

Topic Statement and Methodology

Topic Statement
To evaluate Main Line consumers' perceptions of print advertising for primary care physician services provided by Great Valley Health and Jefferson Health System.

Methodology

* Conduct research using literature referring to focus groups and their benefits and shortcomings.

* Refer to previous focus group studies on similar topics conducted by the Jefferson Health System.

* Conduct a focus group for the Great Valley Health and Jefferson Health System print advertising campaigns and their effects on Main Line residents.
A focus group was conducted among 10 men and women who live in the Main Line area. The group was aged 30 to 60 and had a mix of traditional fee-for-service insurance and managed care insurance. A copy of the discussion guide used to lead the session is included in the appendix. (See Appendix B)

None of the participants in this focus group had chosen a primary care physician within the past three years. All participants said they had their physician for at least five years and some had the same physician for 15 years. To the best of their knowledge, none believed that their physicians were affiliated with any health associations or groups.

For this focus group, questions two through four of part II of the Discussion Guide were irrelevant because none of the participants had chosen a primary care physician within the past year. (See page 32 of Appendix B.)
Awareness/Perceptions of Great Valley Health

Some consumers in the focus group recognized the name, “Great Valley Health,” and a few of those had varying degrees of awareness that it is an association which includes Bryn Mawr, Paoli and Lankenau hospitals as part of the Jefferson Health System. Some were not aware that the Main Line Health System was connected to Jefferson.

Several men and women said they saw advertisements for Great Valley Health, but only one remembered any details of various doctors. This person read through the advertisement and recognized a few names and was attracted to the size of the advertisement.

Reactions to Print Advertisements for Primary Care Physician Groups

Respondents were exposed to print advertisements for Great Valley Health and the University of Pennsylvania Health System. Reactions to each were discussed and summarized below.

1. Great Valley Health - “14 New Reasons Why Great Valley Health Cares About You.” (See Appendix C) This advertisement generally confused participants and evoked many questions. Some focus group participants said the advertisement was unclear and failed to inform them about Great Valley Health.
Some respondents thought Great Valley was a managed care organization forming a health plan. Others were not clear at all. They knew it was not a managed care organization, but they did not know what a health system was.

The physician list also confused several participants. They were trying to determine if the different practices were joining the system or if certain physicians were joining those practices which are already part of the system. Respondents spent a lot of time trying to analyze the advertisement in an effort to resolve this issue. They admitted that they would not spend the time reading and trying to figure out this advertisement if they saw it in a newspaper.

2. University of Pennsylvania Health System - "Now There are Four More Reasons to Choose a Penn Primary Care Doctor." (See Appendix D) Although this advertisement was criticized for containing too much information, several participants liked it because of its personal touch. They appreciated the photographs and felt the advertisement was appealing because it provided a brief biography about each physician. While some said they would not select a doctor based on an advertisement, several admitted they would consider this information if they were seeking a new physician.

3. University of Pennsylvania Health System - "Don't Choose Just Any Doctor. Be Choosy." (See Appendix E) Despite the recognizable logo and favorable reputation of Penn, most participants disliked this print advertisement and said they would pass it by if they saw it in the newspaper. The advertisement
was criticized for being too skimpy regarding the physician list and for focusing on specific geographical areas such as Bala Cynwyd and Bryn Mawr.

Preferences Among the Three Print Advertisements

Of the three advertisements compared, the focus group preferred the University of Pennsylvania “Now There are Four More Reasons to Choose a Penn Primary Care Doctor.” Respondents said they liked it because it provided information about the healthcare system and it gave a toll-free number to call for further details.

The Great Valley Health print advertisement was considered the least favorite by most participants because of the quantity of information, confusing format and text, and impersonal feel of the advertisement.

They were not sure what the advertisement was all about and felt that too many names were listed. They also said that the health system seemed huge and impersonal and would not care about patients’ well-being. Respondents also felt that the headline was too gimmicky.

In addition, some respondents did not favor this advertisement because it did not give enough details about Great Valley Health despite the quantity of information. It did not describe what Great Valley can do for them. They said there were no office hours listed and there was nothing about handling emergencies, educational seminars or specific details about the physicians’
credentials and philosophies. The headline seemed to promise a lot, but the body copy of the advertisement only offered a list of names and nothing more.

Reactions to a Penn Advertorial

A fourth advertisement, University of Pennsylvania Health System - "Talking with the Doctor," was shown. (See Appendix F) It was used to gauge respondents' reactions to advertorials and it was not compared to the previous three advertisements. Participants were favorable toward the question and answer format of this print advertisement. They all agreed that it would catch their attention and that they would stop to read this advertisement if they saw it in a magazine or newspaper. The focus group appreciated this technique for introducing the health system and the physician to potential patients. Some respondents agreed that they would call this doctor if they thought the answer to the question was enlightening.

The Advertisement Most Likely to Encourage Action

Among the four print advertisements presented, the focus group was most compelled by the Penn advertisement, "Talking with the Doctor," which was perceived as informative, current and going beyond straight, traditional medicine. A few focus group members chose the Penn advertisement, "Now there are Four More Reasons to Chose a Penn Primary Care Doctor," primarily because of
Reactions to Current Jefferson Primary Care Advertisement

The following are positive reactions to “One Call. The Right Doctor,” which advertises Jefferson Health System primary care physician practices. (See Appendix G) Main Line consumers reacted favorably to this advertisement. They felt that it clearly communicated the message that the Jefferson Health System has many independent, top quality physicians in their neighborhoods, and it is easy to call for a referral.

Focus group participants also found the advertisement to be warm and personal, and informative and clear. The photograph of happy, healthy patients gave the advertisement a nice, personal touch. The mother and son pictured in the advertisement were smiling, looked healthy and pleased, and were people with whom the focus group could relate.

In addition to the warmth communicated by the photograph, respondents found the advertisement informative. One participant remarked that the photograph was nice, but it was the information that really sold the advertisement. In particular, the copy beneath the photograph clearly made several key points relevant to consumers in their search for a personal physician.

The key points are:

* The sub-headline, “To find a physician near you,” led readers to the copy points which gave the facts they appreciate while reinforcing the point that Jefferson Health System physicians were available in their neighborhoods.

* “400 independent physicians” was positively perceived to offer consumers a large number of doctors to choose from with a large selection right in their own neighborhoods. The word, “independent,” also added to the positive perception of the physicians in this network.

* The second bullet point listing personal types of physicians available through the Jefferson Health System informed the focus group that quality medicine is available right in their neighborhoods.

* The third point mentioned that most insurance plans and HMOs are accepted, which is important to know.

* It was concluded that the final point highlighted the familiar, “Call 1-800-JEFF-NOW,” which was considered appropriate and helpful. The focus group was familiar with this number and said it was very recognizable and well known. They associated it with a referral service.

The advertisement’s layout was considered clean and succinct. It made its point clearly with both warmth and information. Respondents saw this advertisement after having reviewed four previous advertisements for Great Valley Health and the University of Pennsylvania Health System primary care.
physician care networks. Respondents concluded that this Jefferson Health System advertisement gave all the information that some of the others omitted. Also, the group felt that the Jefferson Health System hospital listing was clearly indicated and nicely placed on the right, side panel.

Finally, it was interesting to note that the headline, “One Call. The Right Doctor,” led one participant to fondly recall positive memories of her childhood when her family physician made house calls. Respondents liked the ability to make one call to find the right doctor.

While respondents were primarily positive to this advertisement, one key area caused confusion and conflicting interpretation. This is the copy block in the upper right hand corner which says, “Beth Mariani with 1-year old son, Dominic, Patients, Broomall.”

The relationships between Beth Mariani, Dominic and their physician were not clear. Some respondents thought Beth Mariani was both mother and physician to Dominic while others felt she was the physician and the boy was the patient. Others thought that Beth Mariani was only the mother to Dominic. Since the word, “son,” precedes Dominic’s name, it was suggested that the word, “mother,” precede Beth Mariani’s name to help clarify the matter. In addition, placing a period after Dominic’s name was seen as clarifying the relationships and names.

The words, “Patients, Broomall,” also posed a problem for respondents. Some wondered what these words meant. Respondents did not think Broomall
had anything to do with the advertisement. Some came up with no explanation, while others variously felt the words indicated the location of Beth Mariani and Dominic and/or their physician.

It is important to note that once the focus group did conclude that the mother and son portrayed lived in Broomall, this led to a positive association that Jefferson physicians were in their neighborhood. Broomall was perceived as a nearby and similar suburb.

While most respondents viewed the “400 independent physicians” claims positively, one woman did wonder about how many of the 400 physicians could really be that good.

One other respondent questioned how the physician referral service determines the “right” doctor for patients. She did not know if they would pick a doctor in her neighborhood or if they would match her using some type of criteria. The respondent who raised this question hoped that a physician/patient match was based on such characteristics as physician interests, education, specialties, manner or other relevant factors.

Awareness/Reactions to Health Fairs

Upon hearing the term, “Health Fair,” the focus group imagined a convention hall setting in which medical professionals promote their products and services. Some participants imagined a workplace or hospital setting as well.
Several participants attended health fairs of varying types. A few attended employer-sponsored fairs in which they received free blood pressure and cholesterol screenings, and hints for a healthier lifestyle. These participants had a favorable reaction to these health fairs and said that the fairs gave them free screenings and advice on improving one's health.

Some other participants attended health fairs sponsored by Bryn Mawr Hospital and described these positively as well. One or two participants mentioned that they attended fairs with their spouses and children, and returned more than once due to the informational sessions, enjoyable activities and beneficial screenings.

Preferred Health Fair Exhibits

Respondents said they preferred health fairs that provided information about non-traditional approaches to solving health issues such as literature about homeopathy or biofeedback. They were also favorable towards topics which address the needs of specific demographic segments such as issues related to aging women, for example. A few also said they would like to have free screenings for cholesterol and blood pressure as well as the opportunity to ask physicians questions about health-related matters.

It was also noted that some respondents admitted they would like this type of health fair if it were held at their workplaces during work hours. However, they would not want or be able to attend on a Saturday afternoon.
Reactions to Great Valley Health Fair Direct Mail Card

While most participants perceived this card as attractive, only some found it appealing enough to encourage attendance. (See Appendix H) Their reasons had more to do with the specific topics listed on the card and the scheduled day and time than they did with the idea of a Great Valley Fair. In fact, some were very favorable to its being held at Lankenau Hospital which, they felt, has a good reputation.

Again, some participants said they would not go for the events listed on the direct mail card, but would attend a health fair containing information about alternative medicine and insurance that would cover it. Other participants said they liked the events listed, but were too busy doing errands on Saturdays to be able to attend. Also, some said the window of time was too short. They preferred 10 a.m. to 6 p.m. rather than 10 a.m. to 2 p.m., which did not give them enough time to attend the event.

Reactions to the Post Card Reminder from Great Valley Health

There were mixed feelings about reminder post cards in general. Some participants appreciated receiving them from their own physicians as a reminder for pre-scheduled appointments. However, they were somewhat irritated by receiving reminder cards from unknown physicians who were trying to persuade them to visit their offices.
Unfortunately, reactions to the post card reminder from Great Valley were negative. (See Appendix I) Participants described it as too large in size and similar to junk mail which is perfect for a recycling bin. The illustration on the card was criticized for being too silly, annoying and similar to something from the 1950s. Even those who were not opposed to getting reminder post cards said they would not want to receive this one in the mail. The participants also added that it seemed like a mass mailing to recruit patients.
Chapter 4

Conclusions

This focus group raised some interesting points and revealed interesting observations about consumers’ perceptions of health care systems and the advertising campaigns for these systems.

It seems that with all of the changes happening in healthcare, consumers are somewhat confused about the differences between health systems and managed care organizations. Some think they are one and the same, while others have no idea about what a health system is at all.

Also, there seems to be confusion about Great Valley Health. Many of the Main Line residents who participated in this focus group were not sure of what Great Valley Health is and what its connection is to the Main Line Health System. There also seemed to be confusion about the Main Line Health System and which hospitals are a part of the system. Few respondents even knew that it is connected to Thomas Jefferson University Hospital and that all of the hospitals are a part of the Jefferson Health System.
In terms of the advertisements, the focus group preferred those that explained about the sponsoring health system and the physicians' connections to the health system. They also liked background information on the physicians whether it be specific to that physician or in general about the types of physicians associated with the health system.

The 1-800 numbers were especially appealing because of the ease and convenience they provide to potential consumers. These numbers made the focus group feel that finding a new physician was as easy as making the toll-free call.

Photographs were preferred in the advertisements because they were visually interesting or added a warm, fuzzy feeling to the advertisements. They also let the group know what the physicians looked like who were featured in some of the advertisements, which gave them a personal touch.

Advertisements that were too copy heavy were not at all appealing and alienated readers. The focus group did not like long lists of names or advertisements containing information that was too skimpy.

Respondents liked advertisements that featured doctors practicing right in their neighborhoods. Readers seemed more likely to respond to these advertisements rather than responding to one physician out of a long list of names of physicians from different locations.

Jefferson Health System's current advertising campaign has solved many of the problems that existed with previous campaigns. The information was succinct, listed the different types of physicians in the network and gave the
When comparing Great Valley to Penn, there may still be somewhat of an image problem for Great Valley Health. The focus group seemed to have a tendency to choose the Penn advertisement featuring the four physicians simply because they recognized and highly regarded the Penn name.

Jefferson will have to continue to advertise its health system as a whole, stressing that the Main Line Health System is a part of the entire health system. Also, Jefferson must continue to advertise Great Valley Health and its relationship to the health system and to Jefferson, which has the most name recognition and prestige when compared to the other hospitals that are a part of the Jefferson Health System.

It was also interesting to note that the focus group felt that health fairs were a waste of valuable time unless they were held at the workplace during the workday. This further emphasized how busy people are today and how hectic their lifestyles can be. This is a concrete example of the fraction of selection theory which says that if something takes too much effort with too little perceived reward, consumers will pass it by.

However, it was also interesting to note the focus group’s interest in alternative medicine. This is an area of great interest in our society today. It seems that more research in this area should take place. Perhaps, an alternative medicine health fair or center should be established by Jefferson.
Another interesting finding was the positive reaction to Penn's advertorial, "Talking with the Doctor." This appeared as a news article and was both interesting and informative to readers. They liked both the content and the format of the advertisement. This would work well as a way of advertising individual physician practices in their local papers.

Finally, today's audiences can be quite sophisticated. A hard sell does not work as was exemplified by the reminder post card. It did not work as a direct solicitation, but would work if it came from a patient's physician. Jefferson may want to consider personalizing these types of cards and sending them to their patients on behalf of physicians.

In summary, based on this focus group, audiences prefer succinct information that is also informative. Jefferson should continue to use advertisements that are similar to its, "One call. The right doctor," which hit home with the focus group. This type of advertisement may be beneficial for creating awareness of Great Valley Health with consumers.
Chapter 5

Suggestions for Further Study

As was demonstrated by this market research study, ongoing focus groups must be conducted to continue to test and refine advertising campaigns for Jefferson Health System and Great Valley Health.

In addition to testing for clarity and impact on Main Line consumers, the research must continue to include comparisons between Great Valley Health and University of Pennsylvania Health System's primary care physician practices. This research should continue for two reasons: 1) to determine Great Valley Health's presence in the Main Line area and 2) to gauge consumers' reactions to new and subsequent advertising campaigns for these physician practices.

Jefferson Health System ought to run a few advertorials featuring Great Valley Health in selected Main Line papers and conduct focus groups to research consumers' responses to these advertisements. As was demonstrated in previous research, this seems to be an effective format to convey information about physicians, their practices and health systems in general.
In addition, Jefferson should continue to test and refine effective advertisements such as "One Call. The Right Doctor." Focus group research can be used to build upon successes and to modify or eliminate advertisements that are not effective. Since what consumers think and feel changes with their healthcare needs, focus group research must be an ongoing process. As health systems continue to expand and change, consumers' reactions to these changes must be constantly monitored.

Finally, as was noted in Chapter 1, focus groups cannot scientifically measure results. Jefferson may want to consider probability sampling for more accurate information, which can be used to represent the Main Line population as a whole. However, scientific research should not replace focus groups which yield important information in the health and human services fields.
Endnotes

1 "Reactions to a Storyboard for a Jefferson Cardiac Care Brochure and to Competitive Advertising," Thomas Jefferson University Hospital, July 1993.


4 "Introduction to Research, Multiple Strategies for Health and Human Services," DePoy and Gitlin.

Appendix A
When you choose a Great Valley Health primary care physician, you and your family will receive quality care close to home.

Drs. Fleishman, Laska, Corey and Miller are local Great Valley Health physicians who are board-certified in internal medicine. Like all Great Valley Health doctors, each is committed to your family's good health.

From routine checkups to complex health problems, they provide you with the personal attention you expect from your primary care physician. And, since they are part of Great Valley Health, you and your family have the full support and resources of the Main Line Health System, including a host of wellness and preventive health programs for all ages.

Great Valley Health physicians offer convenient hours, and accept most major insurance. When you need a primary care physician, look for the sign of excellence in healthcare — Great Valley Health.
I. Introduction
   1. Moderator:
      a. Name and role as the discussion leader.
      b. Format of the discussion.
      c. Audio taping for research purposes.
   2. Respondents
      a. Name, family size and composition.
      b. Occupation/interests.

II. Selecting Primary Care Physicians
   1. How many of you have selected a new primary care physician during the past year? (e.g., takes care of most of your health needs.)
   2. How did you make your choice for a new primary care physician?
   3. What influence did any of these factors have on your selection of a new primary care physician: former physicians, friends or relatives, others in the health care field, advertising or other media influences?
   4. For HMO members: What time of year was it when you made a switch to a new primary care physician? (Explored respondent knowledge of when HMO members could switch physicians.)

III. Familiarity with Great Valley Health
   1. To the best of your knowledge, is your primary care physician affiliated with any health association or group? If so, which ones?
   2. How many of you have heard of Great Valley Health?
   3. What is Great Valley Health?
   4. What is your image of Great Valley Health?
   5. (Moderator read respondents a brief description of Great Valley Health to provide an understanding for the next phase of the discussion on advertisement reactions.)
IV. Respondent Reaction to Print Advertisements for Various Primary Care Physician Groups

1. During the next part of our discussion, we are going to look at some print advertisements for various primary care physician groups.

2. (Passed out a copy of each advertisement and read aloud while respondents followed along. Questions three and four were asked for each advertisement:)

   b. Penn: “Now there are Four More Reasons to Choose...”

3. How many of you have seen this advertisement?

4. What is your reaction to this advertisement?

5. Now, I’d like you to place all three advertisements next to each other in front of you. Which format appeals most to you as an advertisement for a primary care physician? (Discussed appeals/drawbacks of each.)

6. Here’s one more advertisement. (Passed out University of Pennsylvania Health System’s advertorial.)

7. Which of these advertisements would be most likely to encourage you to actually seek one of the doctors suggested?

V. Reactions to Current Jefferson Primary Care Advertisement

1. Next, we are going to look at one other advertisement for primary care physicians.

2. (Passed out Jefferson Health System advertisement.)

3. How many of you have seen this advertisement?

4. What is your reaction to this advertisement?

5. What is the main point the advertisement is trying to get across? What are other points?
6. Is this advertisement giving you all the information you need? If not, what else would you want to know?

7. How does this advertisement compare to the previous advertisements we looked at for primary care physicians? Which do you prefer, overall? Why?

8. How can a health care system, such as Jefferson, make it easier for you to find one of their primary care physicians?

VI. Reactions to Health Fairs

1. When I say, "Health Fair," what comes to mind?
2. What is a Health Fair?

3. How many of you have attended health fairs?
   - Where were these?
   - What was your reaction to the one(s) you attended?

4. Gave a definition: A health fair is a community event where there are various booths and exhibits that offer health information or screenings to the public. People can use them to get their blood pressure checked, listen to a lecture on a health topic or sign up for a class that promotes health and wellness.

5. Does this sound like something you might like to attend? Why/why not?

6. What would you like to see at a health fair to make it appealing to you?

7. (Showed a direct mail piece on health fairs and probed for reactions.)

VII. Reactions to Post Card Reminders

1. How do you feel when your doctor sends you a post card reminder of an appointment, screening, vaccination or test?

2. Do you consider a postcard reminder helpful? Why/why not?

3. Here is a sample post card reminder. It is a prototype. What is your reaction to it?
VIII. Conclusion

1. Do you have any other comments or questions?
2. Thanked respondents and adjourned.
14 New Reasons
Why Great Valley Health
cares about you.

This summer, fourteen new physicians will be joining our practices—allowing them to accept new patients and offer more convenient hours.

Each of these practices will accept most major insurance plans, giving you the choice of continued good health of you and your family.

To find a very special Great Valley Health physician near you, call 1-800-JEFF-NOW or call any of the offices listed below.

1. Karen L. Abramza, M.D.
   Newtown/Edgemont Family Medicine
   William L. Carroll, M.D.
   Madeleine S. Wood, M.D.
   5048 West Chester Pike
   Edgemont, PA 19028
   (610) 325-9200

2. Catherine M. Bergman, D.O.
   Wharton Family Practice
   Walter W. Marbus, M.D.
   Barry J. Gilbert, M.D.
   Lenn Rosbak, P.A.
   1450 Bock Road Suite 300 A
   West Chester, PA 19380
   (610) 692-4700

   Phoenixville Family Medicine
   Roger R. Schenkenberg, M.D.
   Dennis D. Bax, M.D.
   Phoenixville Medical Building
   Suite 307 & 750 South Main Street
   Phoenixville, PA 19460
   (610) 933-3182

4. Christopher W. Bolich, D.O.
   and
   Joseph D. Hope, D.O.
   Family Medicine
   Rose Tree Medical Associates
   Michael F. Shank, D.O.
   Doolittle Memorial Hospital
   Outpatient Pavilion Suite 3101
   1298 West Baltimore Pike
   Media, PA 19063
   (610) 899-2277

5.

6. Francis W. Brennan, D.O.
   Whittier Family Medicine
   Gary A. Cooperstein, D.O.
   Whittier Commons
   102 A Schubert Drive
   Downingtown, PA 19335
   (610) 873-2155

7. Frank I. Brinckeno, M.D.
   Family Medicine
   James L. Weinberg, D.O.
   Lankenau Medical Center
   Suite 203 & 510 Darby Road
   (610) 449-9666

8. Linda M. Bullock, D.O.
   Internal Medicine
   Drs. Silver, Neunlist & Morris
   Bruce G. Silver, M.D.
   John E. Nathan, Jr., M.D.
   James A. Morris, Jr., M.D.
   Wynnewood House Suite 303
   300 E. Lancaster Avenue
   Wynnewood, PA 19096
   (610) 642-2002

9. Kurt R. Crowley, M.D.
   Internal Medicine
   Drs. Bennett, Mark, Schuster & Lane
   Joseph S. Bennett, M.D.
   W. Steven Mark, M.D.
   Robert T. Schuster, M.D.
   Ralph A. Lane, M.D.
   Paoli Memorial Medical Building II Suite 227
   Paoli, PA 19301
   (610) 644-9456

10. Robert M. Friedman, M.D.
    Obstetrics/Gynecology
    Bryn Mawr Medical Office Bldg.
    North 830 Old Lancaster Ave.
    Suite 107
    Bryn Mawr, PA 19010
    Paoli Memorial Medical Building III
    Suite 252 & Paoli, PA 19301
    (610) 527-7940

11. Elias A. Karkalas, M.D.
    Upper Merion Family Practice
    170 N. Henderson Rd. Suite 210
    King of Prussia, PA 19406
    (610) 337-2370

12. Walter E. Lewis, M.D.
    Springfield Family Medicine
    Maria Mejia, M.D.
    Lynn Cook, M.D.
    130 S. State Road Suite 200
    Springfield Plaza
    Springfield, PA 19064
    (610) 544-0900

13. Jordan S. Rush, M.D.
    Great Valley GYNE
    Howard E. First, M.D.
    Stewart E. First, M.D.
    Lankenau Medical Building West
    Suite 436
    Wynnewood, PA 19096
    Paoli Memorial Medical Building I
    Suite 205
    Paoli, PA 19301
    (610) 896-7270

14. Stacie G. Stadler, M.D.
    Internal Medicine
    Drs. Hillyer, Stege & Treveko
    Peter Hillyer, M.D.
    Harrison T. Stege, M.D.
    David A. Treveko, M.D.
    Paoli Memorial Medical Building II
    Suite 124
    Paoli, PA 19301
    (610) 647-8885

Great Valley Health
Jefferson Health System

Great Valley Health is a group practice of over 95 primary care physicians and a member of the Jefferson Health System.
Now there are four more reasons to choose a Penn primary care doctor...

**New at Bucks County Internal Medicine...**

Alan M. Kravitz, MD, has joined our Bucks County Internal Medicine practice. Dr. Kravitz is board certified in Internal Medicine. He received his Medical Degree from the State University of New York Health Science Center at Syracuse, then completed his residency in Internal Medicine at the University Hospitals of Cleveland. Dr. Kravitz and the other Bucks County Internal Medicine physicians welcome new patients age 15 and older.

**Bucks County Internal Medicine**
Bristol Newton 215-785-6531 215-860-0775

**New at Yardley Medical Center...**

Inge S. Regan, MD, has joined our Yardley Medical Center practice. Dr. Regan is board certified in Family Practice. She received her Medical Degree from the University of Pennsylvania School of Medicine, then completed her residency in Family Practice at Hunterdon Medical Center. Dr. Regan and the other Yardley Medical Center health care providers welcome new patients, including newborns.

**Yardley Medical Center**
Yardley 215-493-5535

**New at Bucks County OB/GYN Associates...**

Stephanie J. Schwartz, MD, has joined our Bucks County OB/GYN Associates practice. Dr. Schwartz received her Medical Degree from the State University of New York Health Science Center at Syracuse, then completed her residency in Obstetrics and Gynecology at the University Hospitals of Cleveland. Dr. Schwartz and the other Bucks County OB/GYN Associates health care providers welcome new patients.

**Bucks County OB/GYN Associates**
Langhorne 404 Middletown Blvd.
and 605A Corporate Drive 215-752-7078

**New at Yardley Pediatrics...**

Michael S. Dryer, MD, has joined our Yardley Pediatrics practice. Dr. Dryer is board certified in Pediatric Medicine. He received his Medical Degree from Temple University School of Medicine, then completed his residency in Pediatrics at the Medical Center of Delaware. Dr. Dryer and the other health care providers at Yardley Pediatrics welcome new patients, from newborns in age 18.

**Yardley Pediatrics**
Yardley 215-493-6519

These practices and physicians are part of Clinical Care Associates of the University of Pennsylvania Health System, the primary care network Penn is building throughout the Delaware Valley. They accept most insurance plans, HMOs and Medicare. For more information or to make an appointment, please call any of the offices, or:

**PennHealth 1-800-789-PENN**

**UNIVERSITY OF PENNSYLVANIA HEALTH SYSTEM**

Clinical Care Associates

The future of medicine.
Appendix E
Don't choose just any doctor. Be choosy.

If you're joining an HMO, the most important choice you'll make is your primary care doctor. So it's good to know that most HMOs will let you choose a Penn primary care doctor. And there are Penn doctors right in the neighborhood.

Since your HMO lets you choose, why not choose the best? A Penn primary care doctor near you.

Internal Medicine
Bala Cynwyd Medical Associates
191 Presidential Blvd.
610-668-9999
Ronald Barg, MD
(also Geriatric Medicine)
Leonard Bartin, MD
Charles F. Orellana, MD
Robert Weiss, MD

Fleegler and Flanagan
950 Haverford Rd.
Bryn Mawr
610-527-8844
Michael D. Flanagan, MD, PhD
Edward M. Fleegler, MD
(also Geriatric Medicine)

For an appointment, call the physician's office or
1-800-789-PENN

UNIVERSITY OF PENNSYLVANIA HEALTH SYSTEM
The future of medicine.
Appendix F
Talking with The Doctor

Cholesterol dip follows weight loss, exercise

Ronald Berg, M.D.
Board Certified in Internal Medicine and Cardiac Medicine
Bala Cynwyd Medical Associates

QUESTION:
I'm a 65-year-old woman, and for about a year my cholesterol has been above 250 after having been normal for as long as I can recall. I've tried to control it by changing my diet, but it was low in cholesterol to begin with. I also am exercising regularly and am not overweight. Can you discuss this and give me some hints?

ANSWER:
The National Cholesterol Education Panel (NCEP) of the National Institutes of Health recommends that adults keep their cholesterol level below 200 milligrams per deciliter (mg/dL) — a level thought to reduce the risk of heart disease in most people. A total blood cholesterol measurement of 200-239 is considered borderline-high; 240 or above is higher than desirable. But your total cholesterol level doesn't tell the entire story. It's actually the ratio of your high-density lipoprotein (HDL) — the "good" cholesterol — and low-density lipoprotein (LDL) — the "bad" cholesterol — that more accurately identifies your risk of developing heart disease.

A high HDL cholesterol (60 mg/dL or more) reduces your chance of having a heart attack, while a HDL level below 35 mg/dL increases your risk. A desirable LDL number is 130 mg/dL or less; 130 to 159 is borderline-high; and 160 or above is high. The NCEP now recommends that HDL cholesterol be measured along with total cholesterol as part of the initial screening of healthy people over the age of 20.

WHAT YOU CAN DO
You mention that you've tried to control your cholesterol by changing your diet, which was low in cholesterol to begin with. This may be where the problem lies. Simply reducing the number of cholesterol-rich foods you eat (meats, eggs, butter, and shellfish) won't do the trick. You must cut your total fat and saturated fat intake. The body uses saturated fats to produce cholesterol.

The American Heart Association recommends that you limit fat intake to 30 percent or less of your total daily calories. Of this, saturated fat should make up no more than 10 percent of total calories. To hold the line at 30 percent, you've got to control all fats, and get most of the fat you do eat from vegetable instead of animal sources. Vegetable oils, olive oil, canola oil, soybean oil, corn, sunflower, and peanut oils are all vegetable sources. Vegetable sources of saturated fats include coconut, palm, and palm-kernel oils, which are found in many snacks, crackers, and baked goods.

The most commonly consumed saturated fat sources are fatty cuts of meat and whole-milk dairy products. Choose low-fat milks and cheeses and ice milk and lean cuts of meat. Some restaurants and fast-food outlets fry their foods in highly saturated animal fats, such as beef tallow. Fried foods add a considerable amount of fat to the diet, as do many prepared foods such as cakes, pies, salad dressings, and chocolate candy. Limit the amount of fried foods you eat. Look for reduced-fat products such as low-fat mayonnaise and salad dressings. Even lower-fat peanuts are now available.

Replace the fat in your diet with carbohydrates, which should make up about 55 percent of your daily caloric intake. Fat whole grains, peas, beans, and fruits and vegetables. In addition to being low in fat, these foods provide dietary fiber, which also can help lower cholesterol levels.

Making the right diet modifications to lower your blood cholesterol can be difficult. Your doctor may recommend that you see a registered dietician, who can prepare an eating plan for you and explain how to recognize the foods you want to eat more of and those you want to choose sparingly.

Dr. Ronald Berg of Bala Cynwyd Medical Associates is board certified in Internal Medicine and Cardiac Medicine. He is part of Clinical Care Associates of the University of Pennsylvania Health System, the primary care network Penn is building throughout the Delaware Valley. His office is located at 191 Presidential Boulevard, Bala Cynwyd. Dr. Berg welcomes new patients. To make an appointment, please call his office, 610-668-9599, or Penn's physician referral service: 1-800-789-PENN.

UNIVERSITY OF PENNSYLVANIA HEALTH SYSTEM
The future of medicine.
Appendix G
One call.
The right doctor.

To find a physician near you:

- Choose your personal physician from more than 400 independent physicians affiliated with the Jefferson Health System hospitals.
- Our family medicine or internal medicine physicians, obstetrician/gynecologists and pediatricians bring quality medicine to your neighborhood.
- Most insurance plans and HMOs are accepted.
- For more information or to make an appointment with a physician near you,

**call 1-800-JEFF-NOW**
Appendix H
Share your concerns about health.

Attend the Great Valley Health Fair for a day filled with valuable health information, free screenings and fun activities.

There will be something for everyone —
- Free Screenings (Blood, Cholesterol, Pulmonary, and Percent Body Fat)
- Activities Just For Kids (Doll/Teddy Bear Clinic)
- Lectures on Cancer Prevention, Women's Issues, and Child Care to name a few
- Physician Panel: Your Primary Care Physician and your Health
- Meet and talk to Great Valley Health doctors
- And much, much more!

Great Valley Health is a dynamic network of primary care physicians. As part of the Jefferson Health System, Great Valley Health physicians are supported by the full resources of the area's most outstanding hospitals and medical specialists.

No registration required, for more information on the Great Valley Health Fair, call 610-644-1940. To find a very special Great Valley Health doctor near you, call the Jefferson Health System at 1-800-539-6334.

Saturday, April 20
10 AM - 2 PM
Lankenau Hospital
Lobby/Medical Science Building
City Line and Lancaster Ave.
Free Parking

Great Valley Health
Jefferson Health System

• Bryn Mawr Rehab • The Bryn Mawr Hospital • Community Health Affiliates • Great Valley Health
• The Lankenau Hospital • Paoli Memorial Hospital • Thomas Jefferson University Hospital
Get to know

the Great Valley Health physicians ready to care for you in your neighborhood.

To find a personal physician or to schedule an appointment with a Jefferson Health System physician near you, call 1-800-JEFF-NOW.

Flu Shots

Old Man Winter is fast approaching. Beat the flu season by scheduling flu shots for your family. And remember to be sure elderly relatives receive their shots as well.

Great Valley Health Physicians
Jefferson Health System