Hello, I am Gary Brazzell. When I served as the Business Administrator for Southwest Virginia Home Health Care, I implemented a simple, inexpensive marketing strategy that DOUBLED new patient referrals after just THREE MONTHS. This home health agency was the first of many to benefit from this strategy. Over more than a decade, multiple agencies and practices have rapidly increased referrals through disciplined use of the Referral Doubling Strategy. This strategy is built on unchanging essentials of marketing, and ongoing testing verifies that it is still highly successful today.

With this presentation, I will reveal to you exactly what that strategy was, how I devised the strategy, the marketing principles that undergird its success, how we are using it today, and how to tell if it will be cost-effective for your agency. When you see the details of the Referral Doubling Strategy, you will probably see that this same approach could generate additional referrals for your Medicare-certified home health agency.
About Gary Brazzell

Sales & Marketing Experience Since 1989.


Education & Experience

- St. Andrews University
  Graduated top in class

- Somerville & Associates
  Public relations agency in Los Angeles

- In/Max Insurance Agencies
  Marketing Department

- New River Media Group
  Advertising Account Executive

- PTI (Personal Technology Innovators)
  Advertising Account Executive

- Foot Levelers
  An international healthcare manufacturer
  Sales & Marketing

- Southwest Virginia Home Health Care
  Business Administrator

- Brazzell Marketing Agency
  President

Referral Doubling Strategy Revealed
When I started at my home health agency, they were on what we call the referral roller coaster. Having no formal marketing plan, when referrals were down, they had more time to make personal contacts with referral sources. When referrals were up, they found it hard to budget time for sales, and they reduced their marketing efforts. Much to my advantage, one thing they did very well before I arrived was business record-keeping.

I had the patient list dating back five years put in a spreadsheet. Then I was able to study the effectiveness of their past advertising efforts. Intermittently, they had made significant investments in radio, newspaper, restaurant menus, and the programs of local sporting events. Graphing their patient list to show numbers of new patients per month, I could see no effects from those efforts. For the most part, it looked like word of mouth and a reputation for quality of care had guided the growth of this agency thus far. I cancelled all advertising activities for six months.
One of their marketing activities did produce measurable results. Having nurses visit the doctors’ offices worked. Since their sales efforts were intermittent, it was easier to measure a response to specific visits. When graphing the aggregate response of offices that received a visit, I saw that the best results happened one month following the sales call. Results decreased during the second month. By the third month, doctors either dropped back to their old referral levels or found a new, slightly higher level of referral frequency.

Quizzing nurses about what happened on those visits that were successful, I found a trend: referral sources started asking about specific and important topics such as skilled need criteria or our wound care protocols.

Conclusions:
1. The majority of our marketing efforts needed to target referral sources, not the general public.
2. Contacting referral sources on a monthly basis might keep them sending referrals at the higher level.
3. The contact needed to be as informative as a visit from a knowledgeable nurse.
Do a Handful of Doctors Control Most of Your Business?

After studying the referral numbers at my home health agency, I started flipping my new spreadsheet around and studying our referral sources. I quickly realized that four or five doctors sent the vast majority of our referrals. That fact made me lose sleep. What if one of those offices fell away for some reason? It was easy to imagine how one bad circumstance could cut our business by a third or one half overnight! The Referral Doubling Strategy that I eventually implemented expanded our referral base greatly and improved the stability of our business.

How Do You Select Which Offices and Which Personnel to Approach?

Technology has improved, but at Brazzell Marketing Agency today, we are essentially using the same methods for building a prospect list that I used at my home health agency 12 years ago. Look over your list of referral sources for the past five years. Develop a profile of the types of doctors sending you referrals, their geography, how you are connected to them, and their corporate affiliations. Then mine public sources for other medical referral sources who fit that profile. Unfortunately, in our experience, the doctor finder feature at Medicare.gov has the most inaccurate records. Telephone directories and websites still have the most accurate, freely available records for building a prospect list. When you can find them, be sure to gather the names of head nurses at doctors’ offices, office managers, and discharge planners at inpatient facilities. Count on this task requiring eight to sixteen hours of work. When agencies hire Brazzell Marketing Agency to implement the Referral Doubling Strategy, we handle this work and research for new prospects on a monthly basis.

Agencies will often be tempted to skip the doctors who work for a hospital that has a competing home health agency. The interesting thing is, that when established agencies follow the protocol above objectively, and understand the Referral Doubling Strategy, they will find that even doctors who work for ardent competition can be good referral sources.
Referral Doubling Strategy Revealed

Marketing on a Painfully Tight Budget

When I developed the Referral Doubling Strategy for my home health agency, I was also helping them get past some very serious organizational problems and a failure to fully adapt to changing billing regulations. Before I arrived, the owner would periodically go sixty days or more without paying herself, and nurses’ paychecks sometimes were issued days late. They were routinely watching electronic transfers a day or two before payday to see if they would be able to make payroll. If your agency is on a tight budget, know that the Referral Doubling Strategy was first developed for an agency that did not have cash to throw around. Affordability and cost effectiveness was imperative in the beginning.

How Much Response is Enough?

Is just one referral per month enough to justify the addition of a new strategy to your marketing mix? How much is a new doctor worth to a home health agency? To answer these questions, you have to know your profit margin, average number of episodes per referral, and your average revenue per episode. Medicare-certified home health agencies see each patient for 1.81 episodes on average. Medicare reimburses an average of $3,300 per episode. So, for an average home health agency, each referral generates $5,940 in gross revenue. The majority of that money goes straight out the front door in cost of delivery (e.g. nurse salaries, wound care supplies, travel reimbursement, etc.). In fact, the average home health profit margin has plummeted to 14%. That means the average referral generates $832 in profit.

Using a profit per referral estimate will help agencies gauge the cost-effectiveness of any new marketing strategy added to the marketing mix. For instance, if a proposed marketing strategy costs $4,800, you will be looking for that strategy to generate at least six additional referrals. Because the average profit per referral is $832, six additional referrals would generate $4,992 in new profits. Factoring in the $4,800 cost of the marketing strategy, that means $192 have been added to the general coffer to help pay executive bonuses. Of course, 12 additional referrals and a net profit of $5,184 would be more worth your while.

There is another benefit that is harder to quantify. When those new patients are satisfied, they request that same home health agency again in the future. So growth today encourages a snowball effect eighteen months into the future.

The average home health referral is worth $832.
## Referral Doubling Strategy

### Necessary Components

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<thead>
<tr>
<th>Criteria</th>
<th>Details</th>
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<td>Targets</td>
<td>Doctors and Medical Referral Sources</td>
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<td>Informative as a Nurse Visit</td>
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<td>Works to</td>
<td>Broaden the Referral Base</td>
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<td>Inexpensive</td>
<td>Enough to Allow Outreach to Hundreds of Prospects</td>
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<tr>
<td>Monthly</td>
<td>Likely to cost less than $832 per additional referral generated</td>
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### The Referral Doubling Strategy

What I devised was a monthly bulletin (not a newsletter) containing informative articles targeted to the interests of doctors and nurses. This bulletin was sent to any healthcare professional likely to send two or more referrals per year. **After three months and three mailings, new patient referrals DOUBLED or more than doubled in the fourth month and thereafter.** Not just any bulletin can achieve this effect, and it only works for certain agencies, so keep reading to see what we’ve learned.
Research Update

Telehealth Monitoring Improves Home Health Outcomes Including Rehospitalization

In 2009, the Journal of the American College of Cardiology published the largest meta-analysis to date on the subject of telehealth monitoring. This meta-analysis concludes that telehealth monitoring, when added to usual care, creates an additional protective effect compared to usual care alone. This meta-analysis defines usual care as a multi-disciplinary, in-person, plan of care in adherence with American College of Cardiology and American Heart Association recommendations. The addition of telehealth monitoring improves survival rates by 13%.

Last year, The Gerontologist published an interesting study on telehealth monitoring. This study drew our attention because of its very real world design that is highly relevant to the telehealth monitoring program at Medway Home HealthCare. In this study, Gelis and colleagues randomized 115 home health patients (largely Medicare beneficiaries) into a usual home health care group and a home health care plus telehealth monitoring group. All patients had congestive heart failure or chronic obstructive pulmonary disease and received home health care for up to 90 days. The home health group receiving telehealth monitoring showed greater improvement in general health and social function. Over the course of 12 months (including 9 months post-home health), the telemonitoring group was 57% less likely to visit the ER and 29% less likely to require rehospitalization.

The telemonitoring equipment used in this study is the same equipment we use: the Honeywell HomMed device. This device automatically turns itself on at a specified time of day to prompt patients to go through a ten-minute assessment. It uses both verbal and large-text instructions to guide patients through a series of vital sign measurements and disease specific questions. As with our telehealth monitoring program, the monitoring devices in this study were integrated with an online, electronic record system that could be accessed by doctors and all other involved health practitioners and that could be used to email, fax, or print easy-to-interpreted data.

This new study further demonstrates how telehealth monitoring can improve outcomes over usual home health. To supplement the usual nursing, aide, and therapy visits, the telemonitoring system electronically sends daily assessment data to a Medway nurse. It color codes and stratifies the data, prioritizing responses that are or may be problematic, including giving alerts about patients who skipped the assessment. Our nurses can then call patients in an informed, prioritized fashion, provide any assistance needed over the phone, and evaluate whether further attention is needed before the next scheduled visit. Telehealth monitoring enables Medway nurses to respond more quickly to changing health conditions and to dedicate resources where they will do the most good.

Send Medway Your Toughest Patients.

Medway is dedicated to providing competent care for you and to all your patients who qualify for home health. From complex or intensive wound care to home infusion nursing to patients who live in rural areas, Medway is the home health agency ready to provide the care your patients need.

Please tell your patients about MedWay
In a Digital Age, Is Mail Really the Best Way to Reach Doctors?

From a national perspective, mail is one of three best ways to reach doctors because there are only three ways. The ways to reach medical referral sources are sales, mail, and Facebook. Can you send them emails instead? That would be great if you had one hundred to three hundred personal email addresses for doctors and double opt-in permission to email them newsletters, but most home health agencies don’t. Fax marketing is largely illegal in the U.S. Can you target them with Google ads? No. Can you target them with social media? On Facebook, yes, but the specificity of mail lists will make mail a more important choice for established agencies. Most business-to-business marketing plans with a very specific, local or regional target audience rely heavily on sales and mail because of their superior targeting capabilities.

Do Doctors Read Their Mail?

Doctors who already like your agency will definitely be interested in your mail. As for the rest, as with any sales or advertising, a revolving minority of your target audience will engage with your messages. Send your bulletins to hundreds of doctors so that the minority who reads them is large enough to make a difference in your referral numbers.
CMS Now Requires Quarterly HbA1c for Patients with Type II Diabetes

The Centers for Medicare & Medicaid Services (CMS) have new, required care elements for patients with type 2 diabetes mellitus. The local coverage determination applies to sixteen states including Ohio, and it took effect earlier this year. All home health plans of care for patients with type 2 diabetes must include HbA1c level monitoring at least quarterly, and such plans of care must also include intermittent capillary blood/serum glucose level monitoring. Care Corp Home Health is aware of the new requirements and will help doctors make sure all plans of care are in compliance with all Medicare regulations. Top points from the new local coverage determination include:

- Required for all type 2 diabetic patients, regardless of insulin therapy status
- If the home health plan of care is for therapy only, monitoring is still required
- If HbA1c levels are not available at the home health start of care, there must be orders to get HbA1c levels at the time of admission
- Medicare pays for HbA1c levels every 90 days, so Medicare is actually looking for HbA1c levels every 90 to 120 days.

The CDC reports that 12.6% of adults with diabetes exhibit poor glycemic control. CDC researchers state that the majority of adults with diabetes would benefit from reduction of A1c levels to ≤ 7%, and that an A1c level of 9% represents a modifiable, high level of risk that warrants additional intervention. When glycemic control is poor (A1c > 9%), diabetes levies additional healthcare costs, higher risk of hospitalization/re-hospitalization, and high risk of disabling complications. Poor glycemic control creates higher risk of diabetic retinopathy, chronic kidney disease, and cardiovascular disease. When you have homebound patients exhibiting poor glycemic control, please consider Care Corp Home Health as a strong ally in your diabetes management plan. For your homebound patients, Care Corp Home Health can provide a number of services designed to improve your patients’ diabetes management.

Observation & Assessment: In situations where blood glucose levels or blood pressures begin fluctuating abnormally, it may be appropriate for doctors to order a home health episode. Nurses can investigate adherence to special diets and reinforce teaching. They can monitor blood pressure levels and report to the physician for medication changes. They can assess the use of home equipment and make necessary changes. Nurses can also teach diet and exercise intervention to better control fluctuating glucose levels.

Patient & Family Education: Effectively teaching geriatric patients sometimes requires repeated visits and a significant time investment. You can trust Care Corp Home Health to work diligently until your patients demonstrate the skills and knowledge necessary to manage their diabetes. Teaching will include:

- Preparing & administering insulin injections
- Glucose monitoring
- Preparing & following a diabetic diet
- Observation of foot care precautions
- Exercise intervention to control fluctuating glucose levels
- Observation & understanding s/s of hyper/hypoglycemia

Six-Time Recipient of Home Care Elite Recognition

Every year, the HomeCare Elite list names the top home health agencies in the country based on objective, risk-adjusted Medicare data covering patient outcomes, patient satisfaction, quality procedures, and financial stability. With Care Corp’s recognition in the new HomeCare Elite 2014, naming the top 15% of agencies nationwide, Care Corp is now a six-time recipient of this prestigious designation.

Please offer Care Corp Home Health & Hospice to your patients.
Sales is one of the most powerful components of marketing for a home health agency, but sending a highly qualified individual to personally visit a referral source is also one of the most expensive things a business can do. Earning the loyalty of a referral source requires multiple steps.

### Understanding the Difference Between Sales and Marketing Increases Return on Investment

Steps one through three and six through eight can often be advanced or achieved through good advertising for a much lower cost per impression. When managers force their home health sales reps to do steps one through four without advertising support, they are actually paying too much for those tasks. A sales rep who is supported well by advertising can be more effective because he or she can focus on steps four and five, and let lower cost advertising strategies help with the other steps.

### Steps to a Loyal Referral Source

1. Build Brand Recognition
2. Build Brand Trust
3. Teach Your Value Proposition
4. Close a Sale
5. Ensure Satisfaction with Service
6. Educate about Additional Services
7. Maintain Top-of-Mind Awareness (to get automatic referrals in the future)
8. Continue Teaching Value Propositions to Maintain Loyalty
Surgical Site Infections

Triple the Mortality Rate Among Elderly Patients

A study published in the *Journal of the American Geriatrics Society* examines the effects of surgical site infections (SSI) on patients age 65+. Dr. Kaye and colleagues performed a retrospective, matched outcome study with 1,337 subjects. Tracking results for only 90 days post-surgery, they found that SSI correlates with a much higher mortality rate among elderly patients (15.3% vs. 5.2%), increases hospital charges by an average of $41,124, and increases the rate of hospital re-admission by more than 400%. The authors conclude that because outcomes associated with SSI are severe, optimal management of SSI is particularly important among elderly patients.

The Centers for Medicare and Medicaid Services’ list of “hospital-acquired” conditions that are non-reimbursable presents potential for SSIs to become considerable cost centers. Non-reimbursable SSIs include infections following bariatric surgery, laparoscopic gastric bypass, gastrostomies, laparoscopic gastric restrictive surgery, coronary artery bypass grafting, and orthopedic procedures involving the spine, neck, shoulder, or elbow. However, most patients are sent home with healing wounds and with patient/family implemented wound care instructions. For this reason, most surgical site infections become manifest in the home environment, but the exact extent to which home-acquired infections contribute to the prevalence of SSI is unknown. Having drains in place increases the likelihood that an SSI can be acquired in the home, and it is known that at least some health care related infections are introduced in the home environment.

The literature often comments that physicians and hospitals have no control over post-discharge variables. This observation should be qualified by the fact that many elderly patients at risk of SSI will qualify for Care One Home Health services designed to prevent home-acquired infections, ensure adherence to postsurgical instructions, teach family caregivers, monitor SSI, manage SSI in the home, and/or prevent unnecessary re-hospitalization. Care One can do all of this without being a cost center to the doctor or hospital. Refer your at-risk, post-surgical patients to Care One for wound care and infection prevention.

Which patients should be considered for a Care One referral? While being age 65+ in itself ranks as a significant risk factor for SSI, additional risk factors include poor postoperative glycemic control, obesity, diabetes mellitus, malnutrition, prolonged inpatient stay, infection at a remote site, immunosuppressive drugs, and duration of surgery. When these patients are homebound, even temporarily due to surgery, home health is often appropriate. Care One Home Health nurses can provide wound care including negative pressure wound therapy, patient and family teaching, skilled wound monitoring, nutritional intervention, assistance with glycemic control, and more. Promptly identifying and managing SSI in the less costly home environment can serve as a major cost saver for patient and payor while also protecting patient safety.

We Give Patients Personal Emergency Response Systems

For at risk patients, we provide personal emergency response systems (PERS) at no extra charge while your patient is under our care. Patients wear pendants or watches with emergency buttons that will signal a monitoring service if there is a problem. Studies find that monitored PERS reduce mortality rates by 55% and reduce rehospitalization by 59%. For peace of mind and enhanced patient safety .
The concept that you do business with your friends and family to make sure you get good service and good value is an extremely old model of consumer behavior. Today, consumerism and mass marketing provide the option of brand relationships. Brand relationships entail a consumer’s familiarity and comfort with your company and how it operates. Loyal referral sources become accustomed to your processes and marketing image and therefore comfortable with and preferential toward your company.

In Addition to Personal Relationships
Establish Brand Relationships

Advantages of Brand Relationships
• Many busy doctors and nurses deliberately make themselves hard to reach. They do not feel they have time to establish a personal relationship with your rep for your benefit. Attempts at brand relationships are often better received. Doctors who refuse to visit with your reps will often take a look at an informative piece sent by mail.
• Personal relationships are based on people who might leave the company one day. Brand relationships stay with the company regardless of personnel changes.
• Brand relationships can be established using mass marketing techniques. This makes brand relationships less expensive to maintain and build upon.
• Brand relationships facilitate personal relationships. When a doctor is interested in your brand, you will find him or her more receptive to personal contact.
Marketing reps and the healthcare mailer strategy can each work well without the other, but both work better together. (BMA’s clients are almost equally divided between those employing marketing reps and those who do not have marketing representatives.) If your agency already has a marketing representative visiting referral sources, consider this:

- **Open Doors that Were Previously Closed:** Some doctors refuse to spend any time with your reps. The healthcare mailer strategy can get to those inaccessible doctors, pique their interest, and open doors for your representatives.

- **Identify the Best Prospects:** Representatives are not always able to visit all the doctors in the area. When the mailers generate a referral or a question from a new referral source, the representatives will know to start visiting that person or office.

- **Make Additional Impressions in a Convenient Fashion:** A referral source will not be happy if they feel like the representative is visiting too often. Mailers give you the opportunity to make additional, meaningful impressions in a new, convenient format.

- **Equip Your Representatives with Interesting Sales Points:** Marketing representatives often feel like they are saying the same things repeatedly. Brazzell Marketing Agency constantly researches home health, provides new and interesting conversation points, and communicates those points in a way that connects with the needs of physicians.
Be the Number Two Choice

When the competitor turns down a case or cannot respond fast enough . . .

When a patient turns down the doctor’s favorite provider . . .

Whom will the nurse or case manager call next? The first one to come to mind.

The one who has done the most consistent job of staying in front of referral sources will have top of mind awareness. This will be the provider to get the call.

Mailers will make you the number one choice for a few more providers. They can make you the number two choice for many more providers. This can generate a huge difference for a single office.
1. Call Brazzell Marketing Agency toll-free at (866) 272-3799 if you have any questions.

2. Find a copy of the service agreement on the following pages.

3. Fax a completed service agreement to us at (276) 236-5070.

4. We will schedule an initial marketing interview to be conducted by telephone. During this interview, we will analyze your marketing strengths, weaknesses, opportunities, and threats. From this, BMA will devise your unique communications strategy including a positioning strategy for your agency.

5. From then on, you review, edit, or approve bulletins for distribution each month. **Brazzell Marketing Agency does all the work.**
Even after proving the concept at my home health agency, as an employee, I found it hard to maintain the consistency. Patient care, inspections, etc. often prove more important and pressing than working on this month’s healthcare bulletin, so it occasionally got missed. When I let the work slide, I could watch referrals drop in the month following the missed mailing.

This is one of the main reasons I am a strong proponent of outsourcing the Health Care Monthly Mail Program. We would love to do this work for you. BMA designed this package to cost less than it would cost you to do it in-house with salaried and hourly employees. At the same time, BMA has the tools to produce bulletins that are better than what most agencies could do themselves. Serving many referral-based healthcare providers, all with geographic exclusivity, BMA can serve as a nexus for proven marketing ideas.

Why wait to start increasing referrals?
Call Today!

You participate in the initial marketing interview. You review and approve articles before distribution. BMA does all other work:

- Topic selection (however, clients are more than welcome to request topics)
- Research, writing, and design
- Mail list development
- Monthly mail list research and updates
- Printing color flyers
- Printing envelopes designed to mimic your company envelopes
- First class postage on all envelopes
- Folding, stuffing, and sealing

Prices starting at $399 per mailing.
See contract on following page.

You get geographic exclusivity to the Referral Doubling Strategy. You sign on for a minimum of three mailings. After that, you can continue as long as you like or cancel at any time with 30 days’ notice. Most clients enjoy the measurable results and continue for years.
Services Agreement

Health Care Monthly Mail Program

This Agreement is made between Brazzell Marketing Agency with a place of business in Galax, Virginia and

with a place of business in ____________________________.

Brazzell Marketing Agency is hereafter referred to as BMA, and the customer specified above is hereafter referred to as customer.

The customer agrees to a minimum of three consecutive monthly mailings. After the minimum has been satisfied, this Agreement automatically renews on a monthly basis. After the minimum has been satisfied, BMA or the customer may unilaterally cancel the Agreement with 30 days notice. While this Agreement is in force, BMA will design and distribute mailings on a monthly basis, and the customer will make payments on a monthly basis.

BMA agrees to the following:

- To design a new flyer every month.
- To develop a mail list with the assistance of the customer.
- To make all necessary deletions and additions to the mail list on a monthly basis.
- To provide all envelopes, paper, printing and postage necessary for 8.5"x11" flyers in #10 envelopes
- To refrain from mailing until approval for the piece is received.
- To mail up to the quantity specified below in “Fees” each month. “Pieces” means one flyer in one envelope.

Exclusivity: BMA agrees not to enter into the same or similar Agreement with the same type of business with a place of business in the exclusive territory.

Type of Business: ____________________________

Exclusive Territory: ____________________________

Fees:  
- ☐ Up to 100 pieces for $399  
- ☐ Up to 200 pieces for $497  
- ☐ Up to 400 pieces for $746  
- ☐ Up to 500 pieces for $893  
- ☐ Up to 300 pieces for $599 (RECOMMENDED)  
- ☐ Up to 600 pieces for $1040

Pricing & Payment: The customer agrees that a customer credit card should be charged the fee specified above as services begin each month. BMA will send a receipt to the customer with each charge. A late fee will increase amounts not paid each 30 days. The late fee will be the greater of 1.5% each month or $10. The customer hereby agrees that BMA has the right to delay printing and mailing of flyers when there is an outstanding balance due. The customer further agrees that BMA has the right to collect in full the value of this contract even while the printing and release of flyers are being delayed due to late payment. After the minimum time of three months, BMA may adjust pricing without canceling this agreement. BMA must give 45 days notice before changing pricing.

Reproduction Rights: All creative work (i.e. printed materials or graphics) is exclusively the property of BMA. Customer shall not reproduce or copy by any means BMA’s creative work or any part of BMA’s creative work without express consent from BMA.

Effective Date of Agreement:

Provisions: BMA may amend this Agreement without canceling this agreement, but BMA must provide 45 days notice for all amendments. In the event that any term or provision of this Agreement shall be held to be invalid, void or unenforceable, then the remainder of this Agreement shall not be affected, impaired or invalidated, and each such term and provision of this Agreement shall be valid and enforceable to the fullest extent permitted by law. The customer may not assign or transfer this Agreement or any of its obligations without the other’s express prior written permission. Each party represents and warrants that it has the right to enter into this Agreement, and its performance of the Agreement will not violate the terms of any contract, obligation, law, regulation or ordinance to which it is or becomes subject. The customer agrees to be responsible for any and all fees (e.g. legal, collection, etc.) related to the collection of payments due. The person authorizing this agreement represents that he/she has the authority within the customer company to do so, and the party signing for customer below agrees that he/she will be held personally liable for misrepresenting authority to enter into this agreement. However, any personal liability this Agreement assigns to the signor does not void or lessen the liability or responsibilities of the customer. In the event that disputes, including payment issues, must be settled in court, the jurisdiction local to BMA, its successors, or assigns will be the primary jurisdiction. Any copy of this Agreement made by reliable means (such as photocopy or facsimile) is considered an original.

Customer Signature ____________________________ Date ____________________________

BMA Signature ____________________________ Date ____________________________

Print Name ____________________________ Print Name ____________________________
Maximizing Effectiveness

More Tips for Health Care Mailers

Variables that Increase the Likelihood an Envelope will be Opened:

- A first class stamp
- A local return address from a known business in the same industry
- An envelope that could contain patient specific information
- Addressed to a specific person
- Address is typed in title case (i.e. upper and lower case letters), not all caps
- Mailed in an envelope rather than as a spot glued brochure

Bulletins
For doctors, use a bulletin format instead of newsletters. Bulletins get to the point faster and are more likely to deliver a marketing message.

Headlines
Refer to your marketing message in the headline of your bulletin. Put your logo and company name top left. That way, even while doctors are deciding whether to read your bulletin, a marketing message is delivered. That’s the zero second read.

Highlights, Captions, & Callouts
Many doctors will skim your bulletin rather than read it. Some people read photo captions more than actual text. Use these design elements to help skimmers find your most important marketing messages.

Talk About Them First, Then You
Make your main subjects about your audience, their patients, their challenges, and how they can benefit from your help. Most of the time, promoting your sales strengths should be saved for last, and secondary to the part of your bulletin that is about the audience.
Referral Doubling Strategy Revealed

Other Popular Services

Patient Newsletters
You already know the group of people most likely to need your services in the future and to have a doctor who will sign orders for you. It's your previous patients. Affordable, custom newsletters are a great way to reach them, help them remember you, and reactivate past patients. Click: Patient Newsletters

All Points Bulletin
With the increase in competition, agencies that effectively build brand awareness in their communities are beating agencies known only to doctors. The APB serves as one of the most cost-effective ways to engage the public and past patients. Click here for more information: APB

Marketing Brochures
From general brochures, to designs specifically for doctors, to specialty care program brochures, have your brochures professionally written and designed for the ultimate in first impressions. We can write, design, print, and ship 5,000 brochures for just 15 cents each! Click: Home Health Brochures

All Points Bulletin
Facebook, Email Newsletters, Blogging. All done for you while you stay in control. We can guarantee 5,000 views per week. Prices starting at $16.99 per month.

Results@BrazzellMarketing.com
www.BrazzellMarketing.com
Toll-Free: (866) 272-3799
Fax: (276) 236-5070
Referral Doubling Strategy Revealed

Other Popular Services

Google Rankings
Get your agency on the first page of Google for multiple high value search phrases. Be visible at the exact moment clients are making their buying decisions. Brazzell’s SEO has a proven track record and costs half the industry norm! Click: Search Engine Optimization

Facebook Referral Source Marketing
The single most affordable way to advertise to local doctors. With ad views costing only 1¢ to 2¢ each (all inclusive), you can have thousands of referral sources seeing your messages multiple times per week! Click: Facebook Referral Source

Facebook Millionaire Marketing
Private duty providers can now advertise directly to older millionaires or multimillionaires closest to your office, so you can build brand preference and establish market dominance for your local area for private duty services. Click: Facebook Millionaire Marketing
Other Popular Services

**Business Cards**

Brazzell Marketing Agency can save you money while improving the quality of your business cards. We typically print and ship 1,000, glossy, two-sided business cards for 3 to 4 cents each. Click here for more: [Home Health Business Cards](#)

**Websites**

- Files you own and can move
- Text you can edit yourself
- Company emails
- Professional, custom design starting at $299!

More information here: [Home Health Websites](#)