

# Spectrum

Society for Healthcare Strategy & Market Development®

January/February 2019

## PATIENT EXPERIENCE



## It's Time for Health Care Strategists to Drive the Patient Experience

**Piedmont Healthcare is creating a customer experience that rivals that of other industries.**

When Matt Gove joined Piedmont Healthcare in 2011 as chief marketing officer, he wondered why responsibility for the patient experience resided outside of the marketing division. His prior experience was in the realm of

commercial real estate development, which was heavily customer-centric. "No other industry separates marketing and customer experience," he said. "Yet health care is the ultimate consumer business. We touch every person at some point in his or her life."

Four years later and with a new chief executive officer (CEO), Gove was given a new title: chief consumer officer at Piedmont, which operates 11 hospitals

in Atlanta and is the largest health system in Georgia. He had convinced his CEO that marketing was the most appropriate place to lay responsibility for the patient experience. His reasoning was persuasive.

"We have a broad organizational perspective that extends far beyond the four walls of the hospital," said Gove. "Marketers are focused on the entire patient journey, such as what happens

*(Continued on next page)*



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## **Patient Experience**

*(continued from page 1)*

before consumers come to the hospital and what happens after they leave. Traditional leaders of patient experience are concerned only with what happens in the medical center.” The entry of Walmart and CVS into retail health care is also threatening to steer lower acuity patients away in Piedmont’s market. Gove adds that marketers also have the best understanding of consumer behavior. Personas and customer journey mapping are important tools for the marketer’s toolkit—and ones Gove relied heavily on for creating a new patient experience at Piedmont (see Figure 1).

Health system research found that consumers’ biggest sources of frustration were getting an appointment and patient billing.

### **Customers vs. Patients**

In mid-2015, Gove and his team began mapping the patient journey through the Piedmont system. “We found that 92 percent of patient experiences at Piedmont Health took place in outpatient or ambulatory settings,” Gove said. “These are primarily low acuity patients who have a choice in their care. I wanted to reach customers when they are actually acting like consumers, before they need us for specialty care.” The team began researching ways to ease the journey through various touchpoints within and outside the organization. They identified more than 100 different projects to do just that. The list was eventually pared down to nine key initiatives.

During the research, consumers said their biggest points of frustration in health care were getting an appointment and billing. The patient experience group created a plan that addressed these and other issues and rolled it out in the summer of 2016.

One of their first projects was creating the Piedmont Now access phone app.

“It started primarily as a wayfinding tool that gives turn-by-turn directions within the facility itself using Bluetooth beacons,” Gove said. But subsequent updates added consumer-friendly innovations, such as real-time online scheduling where users can see a map showing the next available appointment closest to them, whether in an urgent care clinic, primary care office, retail clinic

or emergency room. The app allows patients to click on the appointment, schedule it and obtain directions to the clinic. Gove likens it to OpenTable for health care. The app was a hit. Over 90 percent of users have accessed it more than twice since the app was upgraded in September 2018.

Another pain point Gove tackled was the billing and finance experience. “The billing process is complicated and difficult

for patients to understand,” Gove says. “We redesigned the bill itself to make it easier to read, and for our customers to know what to do next.” A new payment portal allows patients to see all their Piedmont bills in one place, as well as those from affiliated clinics and independent

practices. They can also pay any of those bills directly from the portal. “My goal is to make the health care experience more like the real world,” he noted.

### **Measures of Success**

How does Gove know these strategies and others are impacting the Piedmont patient experience for the better? “We’ve added one question on all our patient satisfaction surveys: ‘Based on this interaction, would you recommend Piedmont to others?’” Although Piedmont’s survey tool uses a 1 to 10 rating scale with 10 being highest, Gove translates that into the 100-point Net Promoter Score. “The results on our most recent surveys show our Net Promoter Score is almost 80,” he said. “That’s higher than Amazon and Chick-fil-A, which usually score in the low 70s.”

### **Key Takeaways**

When it comes to owning the patient experience, Gove urges marketers to:

- Develop a deep understanding of how customers interact with and flow through their health care system.
- Identify and address patients’ “pain points.”
- Find internal champions and earn buy-in from key stakeholders. Fixing systemic issues requires the input of many departments.

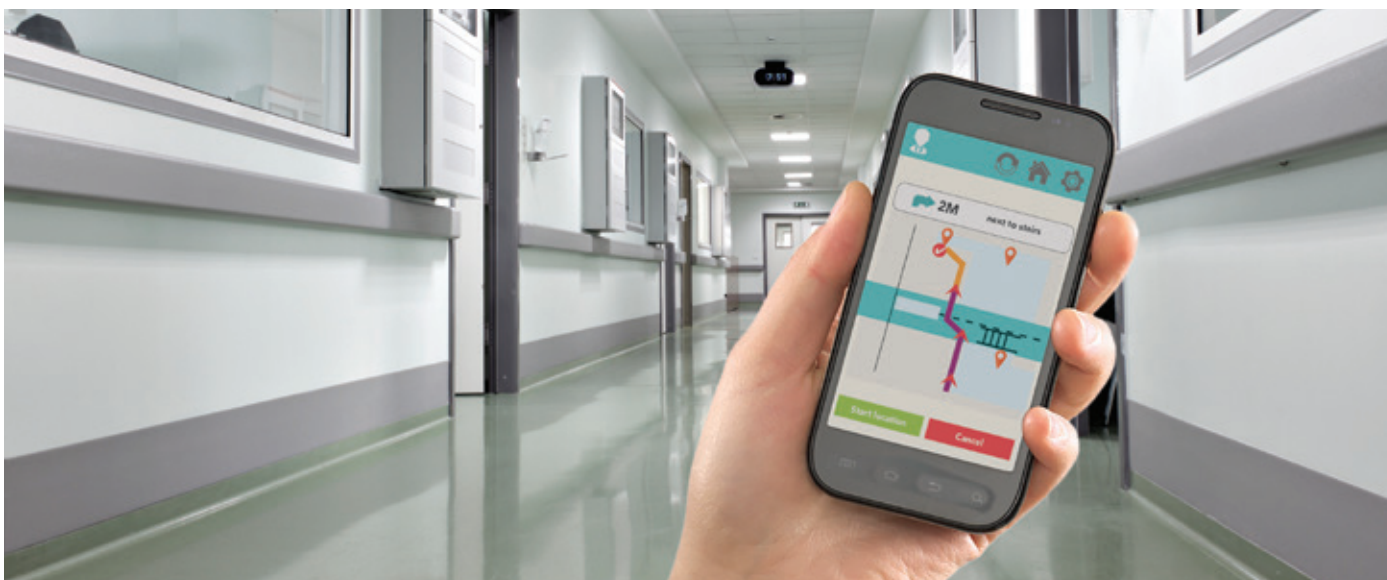
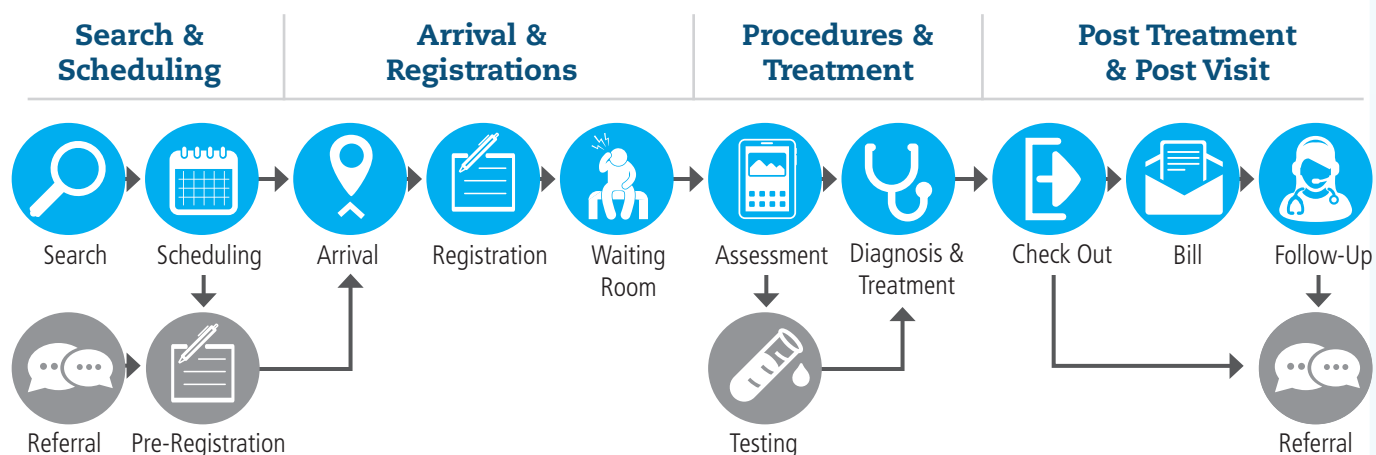


Figure 1.

## Patient Journey Mapping



- Know the appropriate role of technology and digital strategy. Technology does not solve problems, it helps to build and implement a strategy in ways that are unique and help your hospital or health system to stand out.
- Go beyond rating systems such as the Hospital Consumer Assessment of Healthcare Providers and Systems survey to understand your customers' points of view. Look for the trends behind the ratings.
- As with all marketing, measure progress/success.

"It's important for hospitals and health systems to learn from other industries that marketers are best equipped to keep their organizations in touch with the voice of the customer," said Gove. "Our job is to make the patient experience as frictionless as possible."

**Want to learn more about creating a frictionless consumer experience? Download the presentation entitled "Forget Patient Experience: The Time for Strategists to Drive the Consumer Experience Has Arrived" from SHSMD's Virtual Conference at [shsmd.org/virtualconference](http://shsmd.org/virtualconference).**

This online resource provides you with access to recordings and slides from the society's 2018 annual conference.

**This article features an interview with: Matt Gove**

Chief Consumer Officer  
Piedmont Healthcare  
Atlanta, Georgia



# How to Use Marketing Automation to Personalize the Customer Experience

Children's Health is successfully using the power of marketing automation to reach prospective and current patients with tailored messaging.

It is no secret that today's consumer is more digitally focused than at any other time in history. A recent study by Adobe found that American consumers spend an average of 7.8 hours a day engaging with digital content<sup>1</sup>—about the same amount of time they spend sleeping. Marketing leadership at Children's Health in Dallas, Texas saw this trend as both a challenge and an opportunity.


"The Adobe consumer survey found that 42 percent said they get annoyed when their content isn't personalized," said Kay Kerman, manager of email and customer relationship management at Children's Health. "With so much digital content readily available, it's hard to capture attention. Personalization strategies are becoming table stakes for brands that want to effectively compete in the digital landscape." Children's Health is the eighth largest pediatric health care provider in the nation, with two full service hospitals and one rehabilitation hospital. Kerman's team wanted to use marketing automation to deliver personalized content that met their organization's critical business goals.

"Marketing automation provides the ability to reach prospective and current patients with tailored and refined messaging," said Sara L. Hartley, senior director of client development at Healthgrades, which is Children's Health's customer relationship management provider. "It allows the customer to define what is relevant to them, and enables the provider to deliver intelligent and responsive experiences that are personalized."

## Getting Started

The first step, according to Kerman, is working with your internal teams to determine the most important goals they want to achieve and what manual processes could be automated. In addition, marketers need to know who the target audience is and what the call to action should be. It is also important to test the messaging. During her due diligence, Kerman learned that the finance and health information management departments had concerns that Children's Health could be losing out on significant Meaningful Use (MU)

Figure 1



**An easy way to help you focus on what's really important**

Thanks for trusting Children's Health with your child's health care needs. From appointments and follow-up visits to insurance and billing, there's so much to take care of, including your child.

That's why we offer MyChart, our online health records system that helps you manage your child's care, freeing you up to spend time doing what matters most to you.

- Secure messaging with your child's care team
- Request and view medical records
- View appointments
- Request prescription refills
- Access test results
- Pay bills online

**Registration is as easy as 1-2-3!**

1. Click the button below.
2. Fill out and submit the MyChart registration form.
3. Children's Health will contact you with an account activation code.

You're all set!

**Complete MyChart Profile**

Initial registration can be completed on a computer or from a mobile browser, not from the app. After your account has been activated, you can download the MyChart app for mobile access.

**Download the MyChart App for on-the-go access**

get it on Google Play

Available on the App Store

f t y i o

For all inquiries about Children's Health, please visit [childrens.com](http://childrens.com) or send an email to [info@childrens.com](mailto:info@childrens.com).

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incentive payments that are tied to patient use of electronic medical records.

## Marketing Automation Best Practices

Starting in September 2017, one of the first marketing automation initiatives the team developed was an engagement campaign to establish a relationship with the parents of their pediatric patients (see Figure 1). The goal was to engage them in a frictionless registration of their child in MyChart, Children's Health's electronic medical record. MU requirements mandate that providers have at least 5 percent of their patients using a patient portal in order to qualify for the MU incentive payments. MyChart enables parents to message their child's care team, access medical records, view appointments, request prescription refills and pay bills.

"If a patient is discharged and is not enrolled in MyChart, the parents will receive an email the following day," Kerman said. "The email highlights the benefits of MyChart and has a link to sign-up." Kerman tested the email subject lines to determine which had a better open rate. However, enrolling in MyChart is a two-step process that involves access codes that are valid for only 30 days. After learning that many access codes were expiring without activation in MyChart, Kerman's team introduced seven- and 28-day email reminders to register, resulting in a 12 percent decrease in the number of codes that expired. Over the last 12 months, Kerman noted that 56,000 new MyChart accounts have been created, thanks in part to this initiative.

Another marketing automation strategy deployed by Children's Health was a re-engagement campaign. "Even though consumers may subscribe to our communications, not all of them will engage with the email," Kerman said. "Internet service providers monitor customer engagement by domain and if those rates are low, or are marked as spam by too many recipients, they could automatically place emails in recipients' spam folders or stop delivering our emails altogether. We decided to launch a re-engagement campaign to address this." (See Figure 2.) The emails gave unengaged recipients the option of unsubscribing, or staying on the listserve.

Early results of Children's Health's

re-engagement campaign were initially worrisome, but eventually proved the wisdom of the strategy. "The number of people on our newsletter subscription list dropped by about 40 percent," stated Kerman. "But afterward, our email open rate increased 53 percent, and our click-through rate increased by 59 percent." As a result, Children's Health has now set its re-engagement campaign to run monthly.

## Key Takeaways

Marketing automation can be used to personalize and improve the customer experience and achieve company goals. Kerman advises:

1. There is no one-size-fits-all approach. Map out your marketing automation strategy as a flow chart so you understand what action to take next, depending on the response of the consumer.
2. Involve your operational teams to understand how you can address their business concerns and gain buy-in before implementing marketing automation strategies.

3. Test, test and test again. By varying the subject line verbiage in the Children's Health engagement campaign for MyChart, Kerman was able to see substantial improvements in the open rate.

"There is no easy button for marketing automation," Hartley said. "But if you do it right, you can break through the noise to create a personalized, positive customer experience."

For more marketing automation tips, download the presentation entitled "Know Me" from SHSMD's Virtual Conference at [shsmd.org/virtualconference](https://shsmd.org/virtualconference).

## This article features interviews with: Kay Kerman

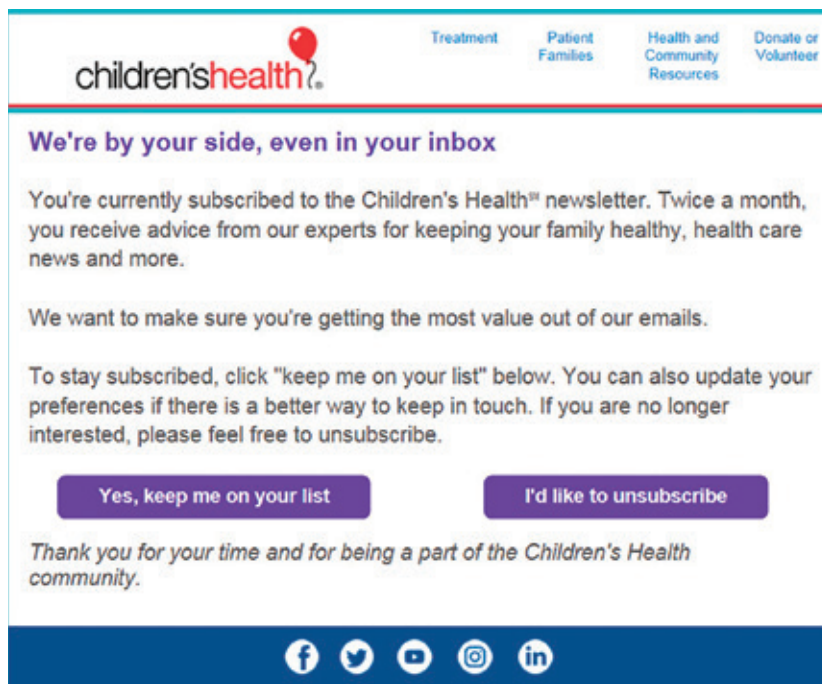
Manager, Email and CRM  
Children's Health  
Dallas, Texas

## Sara Hartley

Senior Director, Client Development  
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Denver, Colorado

<sup>1</sup><https://www.cmo.com/features/articles/2018/1/31/adobe-2018-consumer-content-survey.html#gs.Rx9RbSg>

Figure 2





## Customizing the Health Care Experience for Seniors

Learn how one health system is meeting the needs of this increasingly important population through segmentation and strategies aimed at each unique cohort.

A gray wave is poised to wash over this country thanks to the aging of the baby boomers, and it is a wave whose effects will be felt from coast to coast. Today, seniors are 15 percent of the American population, but in less than 20 years, adults 65 and older will comprise 22 percent of our citizens (see Figure 1). In fact, it is predicted that the number of Medicare-age adults will outnumber children under the age of 18 by 2035, according to the U.S. Census Bureau's 2017 National Population Projections.

Of course, there is a huge difference in the health status of those just turning 65 and people 30 years into retirement. That is why CHI St. Joseph Health in Texas is segmenting its senior population in order to serve it more strategically and efficiently.

"In 2013, we were already caring for over 50 percent of the seniors in our market," said

Donovan French, division vice president of strategy and business development. "In our service area, the over 65 population was growing five times faster than the other demographic segments combined." Unfortunately, the health system's largest primary care medical group was finding it increasingly difficult to provide the more complex care seniors need because of time constraints. It was becoming obvious that seniors could benefit from a more comprehensive care model. As a Catholic health care system dedicated to serving all, including the sick and poor, CHI felt a responsibility to create one for its aging community.

### Segmentation and Strategy

CHI worked with its strategic partner Health System Advisors to help grow its penetration in the senior population through segmentation, and create a multi-faceted strategy for caring for older adults of any age (see Figure 2). Together, they identified four different cohorts within the over 65 market, all with varying health care needs:

- **Healthy seniors with one chronic condition or less**—The goal for this population is to help older adults remain healthy and active.
- **Seniors with two or more chronic conditions**—For this cohort, disease management is the priority. CHI began developing a multidisciplinary primary care model linked to chronic disease clinics, and aimed at increasing market share within this segment.
- **Nursing homes residents**—Typically, seniors in this cohort also have two or more chronic conditions, but their care is delivered in the residential setting.
- **Super users**—Although this is the smallest population in CHI's market, the group consumes far more health care services than any other. On average, these patients are hospitalized eight or more times a year and have the greatest number of emergency room visits. It is critical to closely manage their conditions.

### Building the Infrastructure

As part of its senior segmentation strategy targeting both healthy seniors and those with two or more chronic conditions, CHI developed the MatureWell Lifestyle Center. A multi-purpose facility, the center



combines aspects of a traditional medical clinic with a health and wellness facility. The 23,000-square-foot complex houses an integrated, multidisciplinary care team that offers geriatric and specialty care, physical therapy and the services of clinical pharmacists, dietitians, social workers and an on-site patient navigator. Lab and imaging services are also available, making the center a one-stop shop for geriatric primary care.

In addition, the facility offers a health and wellness club that features cardio equipment, fitness classes, an exercise pool and a demonstration kitchen for healthy cooking classes.

"The goal is to attract healthy older adults and create durable relationships as they start needing more care within the health system," said Kate Lovrien, principal with Health System Advisors.

To reach nursing home patients, CHI began engaging more directly with these facilities to take on their medical directorships. It used geriatrician-led teams with local nursing homes and a nurse practitioner that supervises care delivered onsite. CHI currently holds medical directorships at a majority of the nursing homes in its market.

To manage the care of super users, CHI set up an infrastructure through its clinically integrated network and accountable care organization to identify, coordinate and track care for high-risk seniors that have frequently presented in its emergency room.

## Results

The Lifestyle Center opened in March of 2017 and current volumes are exceeding budget in every area, including two geriatric practices and the physical and occupational therapy clinic. The health club has reached 80 percent of its goal of 500 members, and there has been significant crossover utilization of geriatric medical services. "Some seniors began seeing our care teams after they started using the club," said French. "And it's also worked the other way, with patients in our

clinics becoming club members."

The chronic disease specialty clinic is showing impressive results as well. After the first year, readmission rates of patients enrolled in CHI's congestive heart failure clinic fell 50 percent by linking them with a nurse practitioner upon discharge.

"Our market is still rooted in the fee-for-service model, so population health is not a big focus in our area," French noted. "We engaged in this strategy because we feel it is the right thing to do in caring for our seniors."

## Key Takeaways

French and Lovrien advise fellow strategists and marketers to remember:

1. Organizations should begin customizing care as soon as seniors enter their health system in order to build ongoing loyalty.
2. Customization is not just about the environment. It also involves the protocols, processes, services and experiences that are offered.
3. Coordination with a core group of primary care providers aligned with your strategy is critical.

Learn more about senior strategies by downloading "Customizing the Health Care Experience for Seniors: What, Why and How" from SHSMD's Virtual Conference at [shsmd.org/virtualconference](http://shsmd.org/virtualconference).

This online resource provides you with access to recordings and slides from the society's 2018 annual conference.

## This article features interviews with:

### Donovan French

Vice President, Strategy & Business Development  
CHI St. Joseph Health  
Bryan, Texas

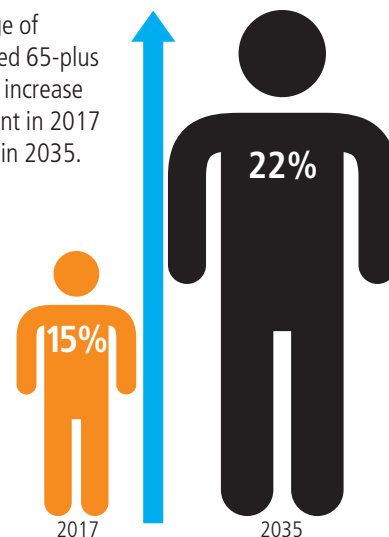
### Kathryn Lovrien

Partner  
Health System Advisors  
Minneapolis, Minnesota

Figure 1.

## The Senior Wave

The percentage of Americans aged 65-plus is expected to increase from 15 percent in 2017 to 22 percent in 2035.



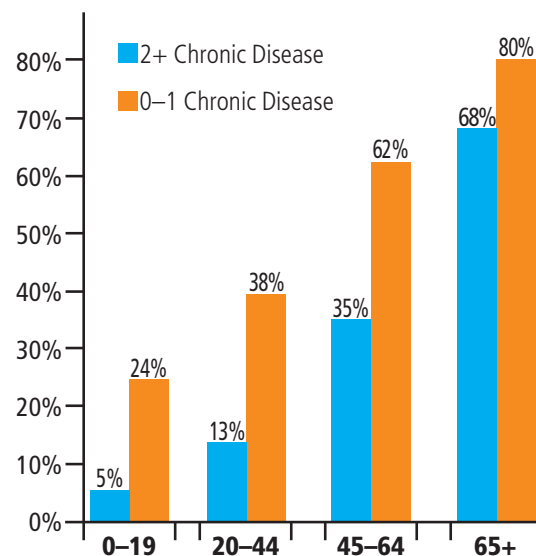
By 2035:

- The number of people aged 65-plus will double from 49 to 78 million.
- 1 of every 5 people in the United States will be retirement age.
- The number of seniors will outnumber children under 18.

Source: U.S. Census Bureau

Figure 2.

## Proportion of Chronic Diseases by Age



Source: Buttorff, C. et. al. "Multiple Chronic Conditions in the U.S." Rand Corporation. 2017.

# The New Health Care Content: Where Earned Media and Social Media Intersect

Orlando Health is using innovative content distribution techniques to achieve strong results by integrating outreach channels.

A popular marketing adage maintains that “content is king.” Just as important in the court of digital consumption, however, is content strategy. More than ever before, health care communicators need to have a content strategy that directly contributes to bottom line business results. Orlando Health is doing just that and reaping the benefits of increased exposure by positioning itself as a trusted health care system with compassion.

“Content marketing isn’t just writing content, it’s getting exposure for that content,” said Michael Schmidt, vice president of Orlando Health Foundation. Schmidt has collaborated with Lisa Arledge Powell, president of MediaSource, on generating

media exposure for Orlando Health, a nine-hospital health system in central Florida.

## The New Content Process: Strategic Storytelling

According to Powell, effective content development and distribution relies on several key tenets. “First and foremost, your content strategy needs to align with your organization’s business goals. It’s also important to ‘tell,’ not ‘sell,’” she said. “Strategic storytelling spotlights people, not the product, so that we convey feelings balanced with facts.” Schmidt added that Orlando Health views strategic storytelling as a process, not a tactic (see Figure 1). His team relies on a tried-and-true formula that progresses through:

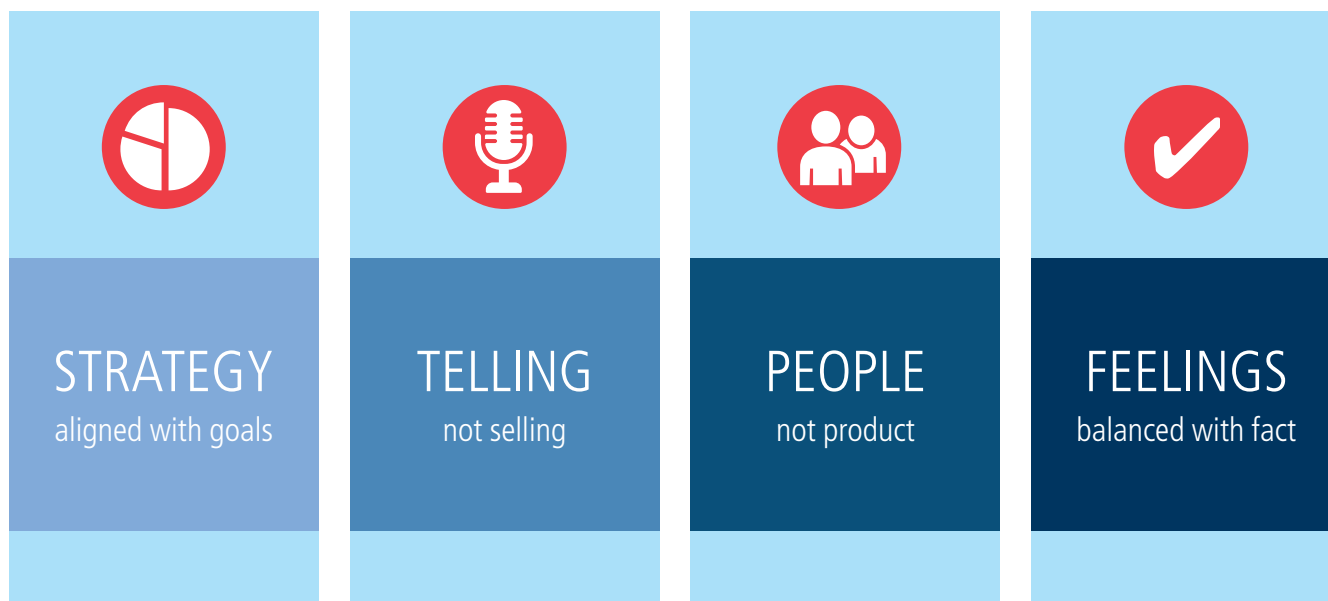
**Ideation:** “We ask, ‘What is our goal and how will we reach it?’ We look at our key product lines and industry trends. But we also consider what we want the viewer to feel after watching our videos, and what

they should feel compelled to do.”

**Creation:** Schmidt said it is also important to ensure you have the right visuals, such as photos, videos and graphics for social media, and in the right formats. Various news outlets have their own requirements for what they will publish electronically and online. “We also aim to create content that immerses viewers in the patient experience we deliver, in a dynamic and captivating way,” he added.

**Amplification:** Powell emphasized that content amplification should target the right distribution channels. “There are four different types of media: paid, earned, shared and owned,” she said. “Paid media is placement that you buy, earned is what you have placed directly through media relations and shared is what you get through social media. Owned media is what you place on your own channels, such as YouTube and Instagram.” Powell encourages marketers to consider all types of media and how best to reach their

**Figure 1**  
**Strategic Storytelling**





target audiences. “For earned media, you may be bypassing reporters and pitching directly to key influencers and third party thought leaders. Marketers should also consider guest blogs, op-ed creation and placement, and newsjacking tactics that leverage breaking news to draw attention to your own content. It’s a great way to insert your organization into the social conversation.”

**Evaluation:** An important part of the process is evaluation, and not just at the end of the campaign. “We look at our results in real time to see if we need to adjust our tactics,” Schmidt noted. “That allows us to pivot when needed so we have better chances of meeting our goals.”

### Strategic Storytelling in Action

Orlando Health used all of these concepts in its highly successful campaign, the Thank You Project (see Figure 2). “A decade ago a family was in a horrific car accident and our emergency department and intensive care unit staff saved the life of a mother and her son,” Schmidt said. “Years later she approached us and said she wanted to thank all those who saved her son’s life.”

Over the course of several months, Schmidt located close to 20 personnel involved in the son’s treatment and arranged for the mother to reunite with the caregivers one by one to express her gratitude and let them know that her son was able to resume a normal childhood thanks to their care.

A videographer documented it all, including the mother explaining her quest and meeting with the nurses at the hospital. The videographer also recorded an appreciation event the Orlando Health public relations staff planned for the mother to publicly express her gratitude. At the same time, the team from MediaSource was pitching the story to national news outlets to determine which ones might be interested.

“The video was picked up by The Today Show,” Schmidt said. “It ran the morning of Thanksgiving, prior to the Macy’s parade.” The video went viral, generating

over 5 million YouTube views and over 35,000 social media shares from YouTube and the Today Show’s website. There were also over 99,000 views on Orlando Health’s Facebook page. Overall, the audience reach totaled 109 million between earned, owned, shared and paid media channels.

Schmidt credits the success of the Thank You Project to a variety of factors, including strategic timing aimed at the holidays, customized pitches to news outlets and coordination with owned media. And just as important, the subject was emotionally engaging and compelled viewers to share their viewing experience with others.

“By immersing viewers in a patient’s experience, we communicate excellence and compassion by showing, not telling,” Schmidt said. “So often, hospitals repeat the cycle of talking about their new physicians, equipment and awards. Those things are great, but if you’re really looking to capture people’s hearts, you have to think and act differently.

Stories are a universal language that appeal to our humanity.”

Schmidt credits much of the success of the Thank You Project to strategic timing, customized pitches to news outlets and coordination with owned media.

### Key Takeaways

1. Make content a process in your organization.
2. Focus content to celebrate those you serve, not yourselves.

**Figure 2**  
**The Thank You Project**



3. Amplify content across multiple channels.

For additional tips on creating a content strategy, download our presentation entitled “The New Health Care Content: Where Earned Media and Social Media Intersect” from SHSMD’s Virtual Conference at [shsmd.org/virtualconference](http://shsmd.org/virtualconference).

### This article features interviews with:

#### Michael Schmidt

Vice President, Orlando Health Foundation  
Orlando Health  
Orlando, Florida

#### Lisa Arledge Powell

President  
MediaSource  
Columbus, Ohio

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## Save the Date!

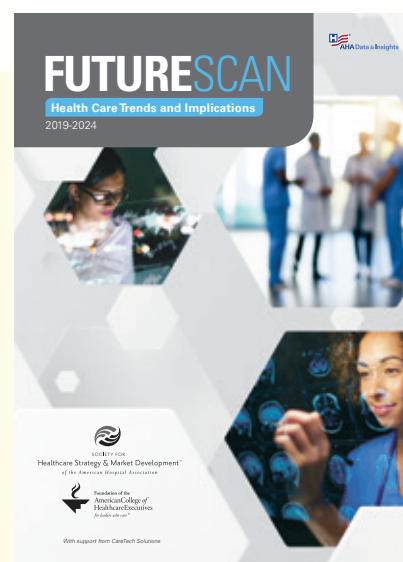
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This edition focuses on:

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# Q&A

The following questions and answers come from posts on SHSMD's members-only online discussion groups.\* To join the conversation, visit [my.shsmd.org](http://my.shsmd.org).

## Provider Website Profiles

**Q** *I'm curious to learn what others are doing with the provider profiles on their website. In particular, do you include a profile for all providers who have a relationship with your hospital?*

**A** The general consensus from most organizations at this point seems to be to include all providers. Obviously the employed providers, but also mid-levels as people are more open to seeing mid-levels now and it helps your organization look more well-rounded to have them in the system.

As for doctors who are not employed, generally all providers with admitting privileges are included. Again, this leads to a more well-rounded directory that allows consumers to have a "one-stop shop" and creates alignment in patient acquisition efforts.

**A** We list on our website all providers who have privileges at our hospitals. This includes physicians, nurse practitioners, and physician assistants. We don't

have restrictions based on scheduling.

Historically, our leadership has wanted our "Find a Doctor" web tool to serve as a useful connector for people in need of health care, even if we're connecting them to providers that are not employed by our health system.

## Communicating to the Community

**Q** *We would like to do a better job of informing our community about our medically assisted treatment program, and we'd like to develop a piece we can distribute to local social service agencies that serve a population who may need this service.*

*Despite the best intentions of people involved, the content is just too clinical and quite frankly misses the mark. I feel it needs to be short, concise, to the point, as well as compassionate and understandable.*

*What are your thoughts on informational materials for such programs?*

**A** If the lay community is your audience, I'd lobby to cut "medically assisted treatment" out of your communication. Focus your communications by defining the problem, the solution(s) and benefits of what you're offering. For similar reasons, I refuse to use the expression "minimally invasive procedure." Ask two to three lay people what that means, and you'll understand why.

**A** I agree. It can be challenging to get internal clients to understand why it's important to speak at the audience's level. I've found the best way to tackle this is to let the target audience give feedback on the draft copy. Ask three to five people who agree to be video recorded to read the copy. Capture their answers as you ask them a few questions about what they read. It often becomes clear to the client that their message isn't being delivered. You can then revamp the copy and "test" again.

\*The answers to the above questions are excerpts from MySHSMD discussions. In some instances the responses have been edited for grammar and/or brevity purposes for Community Connections.



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Additional programs will be added, be sure to check back for more!

### JANUARY

January 9, 2019

**Hospital Digital Experience Index**  
SHSMD U Sponsored Webinar

January 16, 2019

**Yes, You Can Create Your Own Podcast.**  
**We Know; We Did It.**  
SHSMD U Webinar

January 28–March 15, 2019

**The Power of Effective Storytelling in**  
**Health Care**  
SHSMD ADVANCE™ | Credential

### MARCH

**The Digital Series: Defining Goals, Content,**  
**Channels and Tracking**  
SHSMD U On Demand Course



### SHSMD Connections Virtual Conference

Don't forget! More than 60 concurrent session recordings from SHSMD Connections 2018 are available to view – we are bringing the conference to your desk!

Visit [shsmd.org/virtualconference](https://shsmd.org/virtualconference) for details.

### FEBRUARY

February 13, 2019

**Futurescan 2019–2024: Leading Through**  
**Times of Change**  
SHSMD U Webinar

February 18–March 15, 2019

**Orientation to Health Care**  
SHSMD U Online Course

**Strategic Planning Electives**  
SHSMD U On Demand Course

### APRIL

April 2, 2019

**The Connection between Strategy and Marketing**  
**Professionals and Value**  
AHA Webinar

April 29–June 28, 2019

**SHSMD U 2019 Credential | Health Care Marketing**  
**Plans, Communications and Market Research**  
SHSMD U Online Course Series

April 2019

**Financial Implication/Management**  
SHSMD U Online Course



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