



Age-In Content Strategy  
Filling the Medicare Pipeline  
Through Content Marketing



# Executive Summary

## Background

While multiple efforts are underway to drive immediate Medicare growth in 2019, there's an urgent **need to cultivate the next wave of Medicare enrollees** – who are aging-in at a rate of 10,000 per day over the next 10 years – and **improve Commercial to Medicare conversion.**

**Anthem's current Age-In pipeline** of Commercial members turning 65 over the next 5 years – stands at **1.3 million**, and goes up to **2.8 million** over the next decade.

## Our Challenge

Anthem needs a dedicated approach for **engaging** with this audience now and **nurturing** them, so that when they're ready to shop for a plan, they **consider Anthem as their #1 option and purchase** a plan with us.

## The Strategy

Use **content marketing** to:

- 1) **Drive awareness, affinity and trust with pre-Age-Ins** of Anthem as a Medicare provider,
- 2) **Educate (and convert)** Medicare shoppers and switchers,
- 3) **Fill a known gap** for our employers and brokers.

Sources: Internal Anthem data; 2018 Anthem Commercial Age-ins Leakage Study; Understanding the next wave of Medicare enrollees (Deloitte 2017)

\*As of 12/13/2019. Medical members in the given LOBs who reside in our 14 blue states (not yet adjusted for service area in MO, NY, VA). As is stands these numbers will change 1/1 based on drops/adds in our group accounts.

**2017 Conversion Rates**  
from Anthem's Commercial  
to Medicare portfolio

- 18% Individual
- 16% Small group
- 3% Large group
- 6% National

| Birth Year     | Age at 12/31/2018 | All LOB*         |
|----------------|-------------------|------------------|
| 1954           | 64                | 247,633          |
| 1955/6         | 62-63             | 524,965          |
| 1957/8         | 60-61             | 568,140          |
| 1959-63        | 55-59             | 1,498,940        |
| <b>1954-58</b> | <b>60-64</b>      | <b>1,340,738</b> |
| <b>1954-63</b> | <b>55-64</b>      | <b>2,839,678</b> |

## Strategic Approach:

We'll leverage **content marketing** across the Medicare lifecycle to engage not only current prospects, but also **“trailing edge” Boomers** - who face new and unplanned challenges as they age while positioning Anthem as their **trusted partner** during their years **leading up to retirement and beyond** – and the brokers and employers who seek to provide guidance to this group.

The efforts laid out in this strategy will move the needle with commercial members and also create a halo effect with non-members.

- Deliver a robust, dynamic and distinctive experience with a [Medicare Education Hub](#) addressing issues that are most relevant to those aging in over the next decade.
- Build awareness and authority Anthem's future Medicare members
- Serve as an access point to the sales pipeline with resources for brokers and employers

# Why should we invest in a Medicare Age-In Content Strategy?

This work is **table stakes to remain relevant** and Anthem can gain significant **competitive advantage** if we are doing it better than anyone. It's not the gap closer for 2019, but it's foundational work to remain relevant and has the potential for high ROI.

| Financial assumptions for Age-In proforma* | MA    | MS   |
|--|-------|------|
| Sales Mix                                  | ##%   | ##%  |
| Op Gain (pmpm)                             | ##    | ##   |
| Revenue (pmpm)                             | ##### | #### |



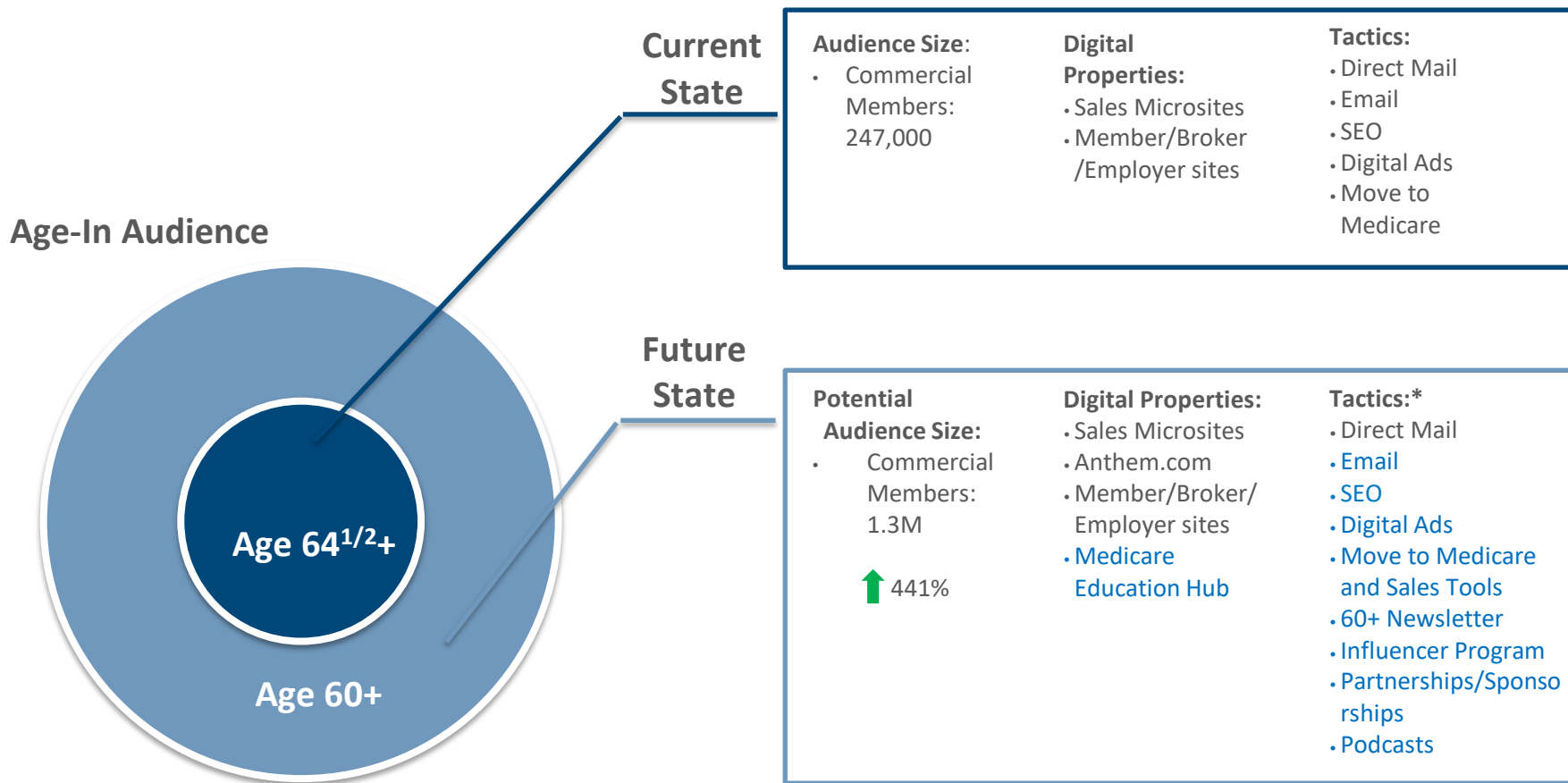
**Potential additional revenue in 2019** if commercial to Medicare conversion grows by #% - adding ### members. #% improvement in conversion = **Ops gain of \$#k**



**Potential operational gain** from Anthem's current age-in pipeline – 1.3 million Anthem members – who are turning 65 over the next 5 years

\*Source: Anthem Transformation Office Finance – GBD  
 4 \*\*2017 National Population Projections 2016 to 2060, US Census Bureau

# A key facet of the strategy relies on targeting prospects at an earlier age to increase our Medicare pipeline by **more than 400%**

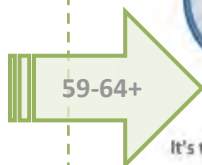


*Blue indicates expanded or new tactics to reach bigger and more diverse audience.*

*\*Not inclusive of all consumer tactics to be considered.*

# The content will dock seamlessly into existing Commercial efforts at the front end...

**Starting at age 64, Members receive communications about Medicare options and will receive courtesy follow-up calls from a Health Plan Advisor**



It's time to start thinking about Medicare

Find out which Medicare option may fit you best

Get the facts about Medicare in your free guide

Count on us for a plan recommendation

Take charge of your Medicare choices now

Get ready for the Medicare benefits you've earned

Enroll now to help fill the gaps in Medicare coverage

Don't wait enroll in a Medicare option today

You have limited time to get affordable Medicare coverage

Get matched to a Medicare option in seconds



\* Source: Member Age-In Communications Mar\_2018 Final\_v2

► And it will be designed to fulfill the needs of multiple audiences



## Shoppers

...who need to understand the complexities of Medicare and feel confident in their Medicare decisions



## Commercial Members

...who need to understand the importance of thinking about saving for health care in retirement and how to prepare for it



## Brokers and Employers

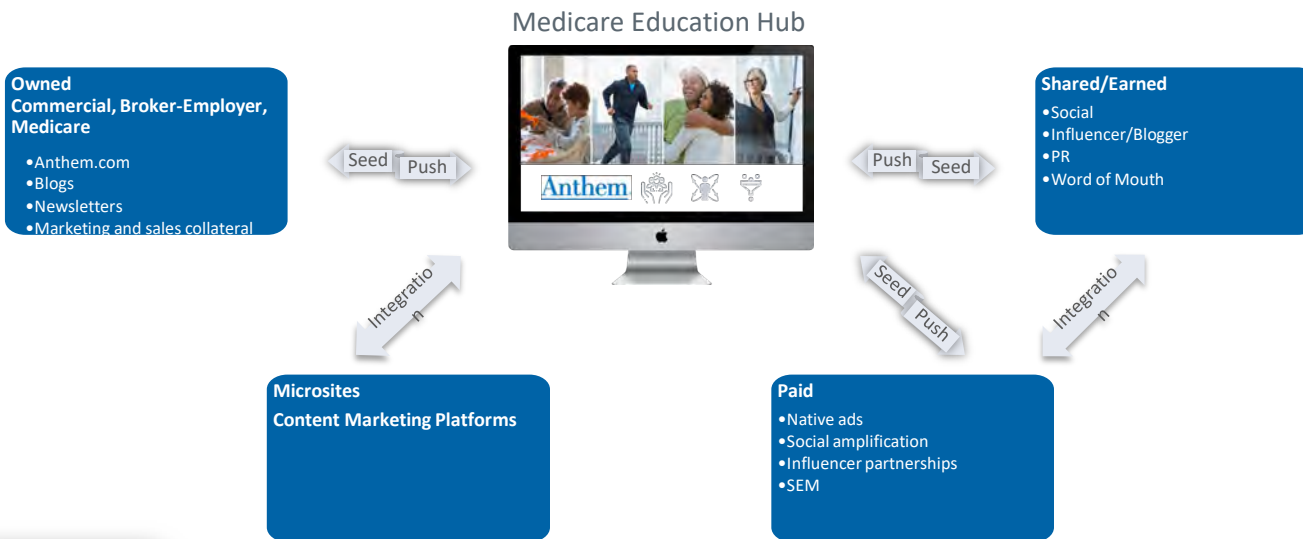
...who need help communicating to employees and clients about Medicare and how it works

# To create a robust, dynamic and distinctive experience, it should include three major components





# A paid, owned and earned model will be adopted to create a Medicare lifecycle digital ecosystem



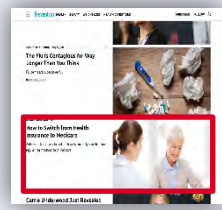
Work Already Underway Processes in place that can support and drive traffic to MVP immediately



60+ CSBD Member Newsletter March 2019



Content Development for Consumer Blog



Native ads and paid social for 2018 AEP



Influencer proposal in hand



Blog share widget



Social sharing

# Standing up a proof of concept:

How can we apply this approach quickly to make an immediate impact in 2019?

## MVP Must-Haves:

- Educational content that meet our consumers' emerging needs as they age
- SEO-driven, Medicare-focused content
- Access points to our sales pipeline
- Distribution channels to push users back to content

1

### Build out content hub on Anthem.com

- Use existing Better Care Blog as model
- Dev by digital solutions
- Dovetails with other Medicare/SEO efforts



2

### Buy BCBSSC technology

- License or purchase infrastructure
- Customize to support breadth of content and possible redesign
- Choose as an add-on to .com or create a standalone site

3

### Build standalone site

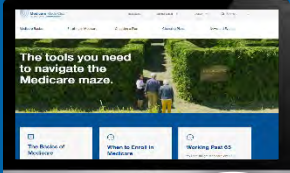
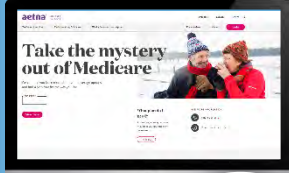



- Will likely require RFP process
- Most expensive option
- Could cannibalize SEO and digital adoption efforts



## Competitive Summary

# A closer look at the landscape of Medicare and Retirement planning sites

There are several like-minded organizations with sites that run adjacent to – but don't fully embody – our vision

|   |   |  |  |  |
|---|---|--|--|--|
|  <p>UnitedHealthcare</p>   |  <p>aetna</p>  |  <p>Blue Cross BlueShield of South Carolina</p>  |  <p>Nationwide</p>  |  <p>ncoa National Council on Aging</p>  |
| <h3>Medicare Made Clear</h3> <ul style="list-style-type: none"><li>• Clean and organized design</li><li>• Middle to bottom of the funnel topics broken out by the shopper journey</li><li>• Little differentiation between this content and content from other providers or resources</li></ul> | <h3>Aetna Medicare</h3> <ul style="list-style-type: none"><li>• User experience designed for an older audience</li><li>• Like UHC, no differentiation of content</li><li>• Mostly middle to bottom of the funnel topics</li><li>• Current members seems to be main audience and intent is to drive conversion</li></ul> | <h3>My Big R Plan</h3> <ul style="list-style-type: none"><li>• BCSSC resource center built to educate and nurture consumers approaching Medicare age (ages 58-63)</li><li>• Fairly unsophisticated and doesn't have the content or page depth to support our full vision</li></ul> | <h3>Nationwide Retirement Institute</h3> <ul style="list-style-type: none"><li>• Site for Nationwide financial advisors to help clients make informed decisions on planning and paying for health care costs in retirement</li><li>• Can be used as a model for how we empower employers and brokers</li></ul> | <h3>My Medicare Matters</h3> <ul style="list-style-type: none"><li>• Purpose: educate consumers about Medicare and the shopping process</li><li>• Content fragmented across multiple sites</li><li>• Opportunity to leverage existing partnership for content sharing, co-creation or even co-branding</li></ul> |

# Competitive audit

We started this effort by conducting a content audit of Anthem and its major competitors to understand the current landscape



### Content Highlights\*

There is little differentiation with fundamental content. Content is largely missing, skipping via educational on the basics.

Anthem leads in its powerful devices of storytelling and executive thought leadership.

Anthem and Anthem provide simple, interactive questionnaires to help figure out the right plan options.

Humana's SectionBridge site offers many valuable caregiver resources including tips, assessments, and checklists.

Humana's Medicare shopper site has a section dedicated to Medicare costs and retirement planning.

Everyone talks about CRM and H&M, but rarely with a similar focus. When it is mentioned in context of Medicare, actual content is usually linked to an adviser site or it's buried and the quality is mediocre.

\* All visuals are hyperlinked to web source.

### Experience Highlights\*

Anthem and UHC have dedicated Medicare sites with robust tools and content, open design and layout for easier consumption.

UHC's Solutions for Caregivers site lets users create personalized experiences based on needs and concerns of themselves and loved ones, and also allows the user to save favorite content. Users can opt-in for email newsletters and welcome message is delivered immediately to user's inbox.

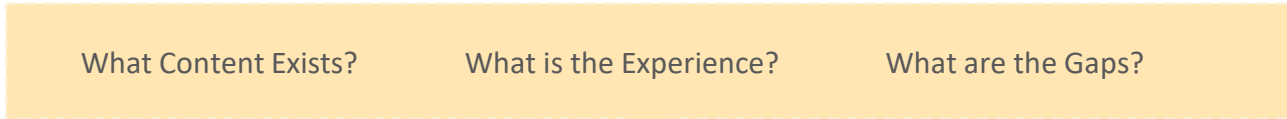
Strategic partnership call at various levels, mostly from a co-branding and product standpoint. UHC, Aetna the evergreen UHC content.

Shopper site users, the look and feel of delineating providing consistency when moving from site site to the others.

Aetna provides need based navigation (ex. I'm new to Medicare).

\* All visuals are hyperlinked to web source.

The content was assessed through three filters ...



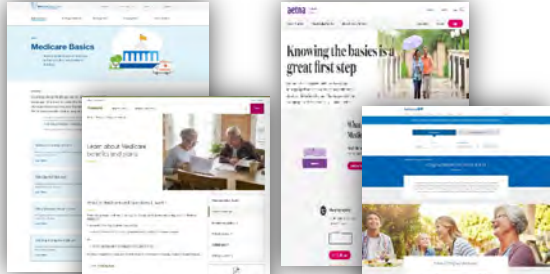
... yielding a number of actionable takeaways

- **Prioritize topics** based on need (and journey map) and develop strategic approach for how and why we talk about them.
- **Assess and realign owned content** across microsites for consistency and comprehension.
- Invest in **differentiating, best-in-class content and the channels** by which it's distributed.
- Develop a coordinated plan for **content distribution** across owned channels.

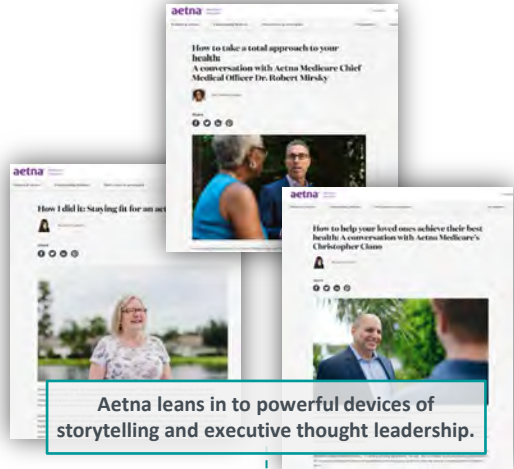
## Content Audit Key Takeaways

- **Prioritize topics** based on need (and journey map) and develop strategic approach for how and why we talk about them.
  - Key opportunities: financial planning (because of its almost complete white space and clear audience need), as well as caregiver and senior-focused wellness and disease management topics (to achieve parity with other carriers).
  - Develop separate Caregiver strategy to maximize content effectiveness for this audience of influencers and future Medicare members themselves.
- **Assess and realign owned content** across microsites for consistency and comprehension.
  - Package content in a simple and intuitive experience, with **consideration for how the Medicare content hub integrates into the ecosystem.**
  - Utilize need-based and situational navigation and sub-categories. (Ex. *I'm new to Medicare, I need a different plan, I'm shopping for a loved one.*)
- Invest in **differentiating, best-in-class content and the channels** by which it's distributed.
  - Utilize storytelling as a vehicle for humanizing Anthem and creating memorable content.
  - Use Anthem's thought leaders and executives to emphasize authority on certain topics.
  - Invest in more interactive, dynamic and shareable content.
- Develop a coordinated plan for **content distribution** across owned channels.
  - Use email to nurture commercial members who are currently Aging In or 65+, as well as those approaching it over the next several years.
  - Consider seasonality and trends to maximize impact.

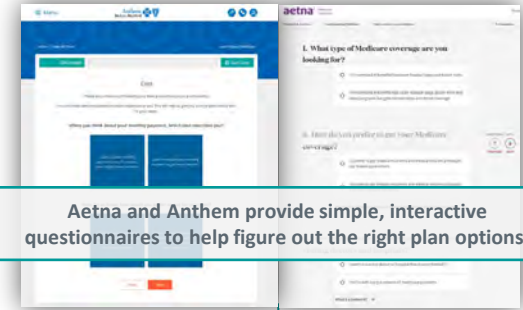
# Competitive Audit Highlights\* - Content



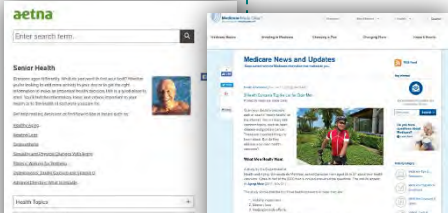
There is little differentiation with fundamental content. Carriers are largely driving shopping via education on the basics.



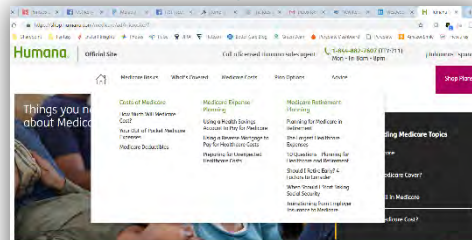
Aetna leans in to powerful devices of storytelling and executive thought leadership.



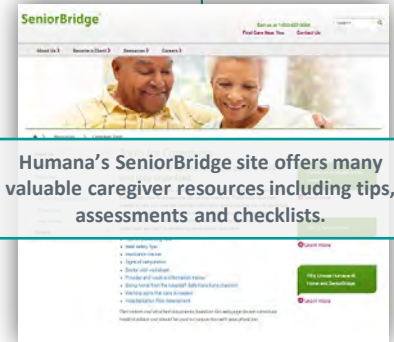
Aetna and Anthem provide simple, interactive questionnaires to help figure out the right plan options.



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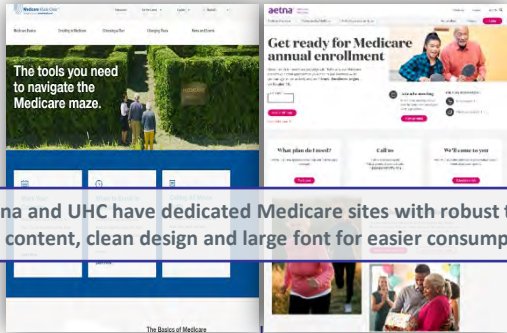
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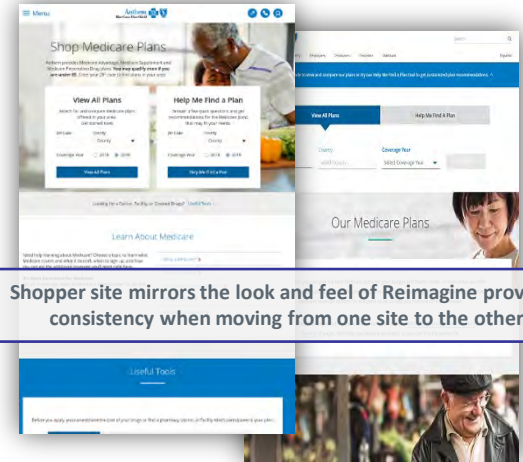
# Competitive Audit Highlights\* - Experience



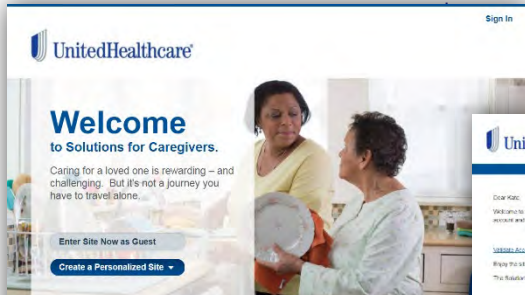
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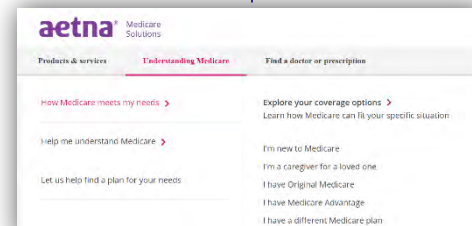
Strategic partnerships exist at various levels, mostly from a co-branding and product standpoint. UHC-AARP site repurposes UHC content.



Shopper site mirrors the look and feel of Rethink providing consistency when moving from one site to the other.



UHC's Solutions for Caregivers site lets users create personalized experiences based on needs and concerns of themselves and loved ones, and also allows the user to save favorite content. User can opt-in for email newsletter and welcome message is delivered immediately to user's inbox.



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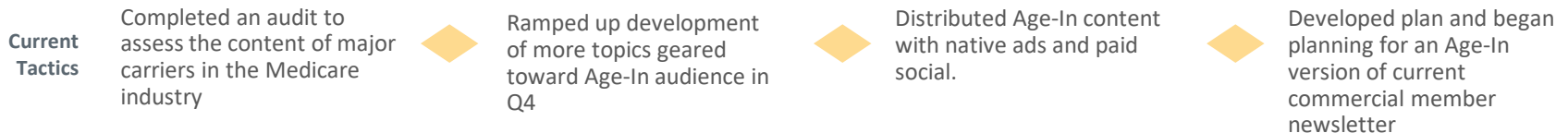
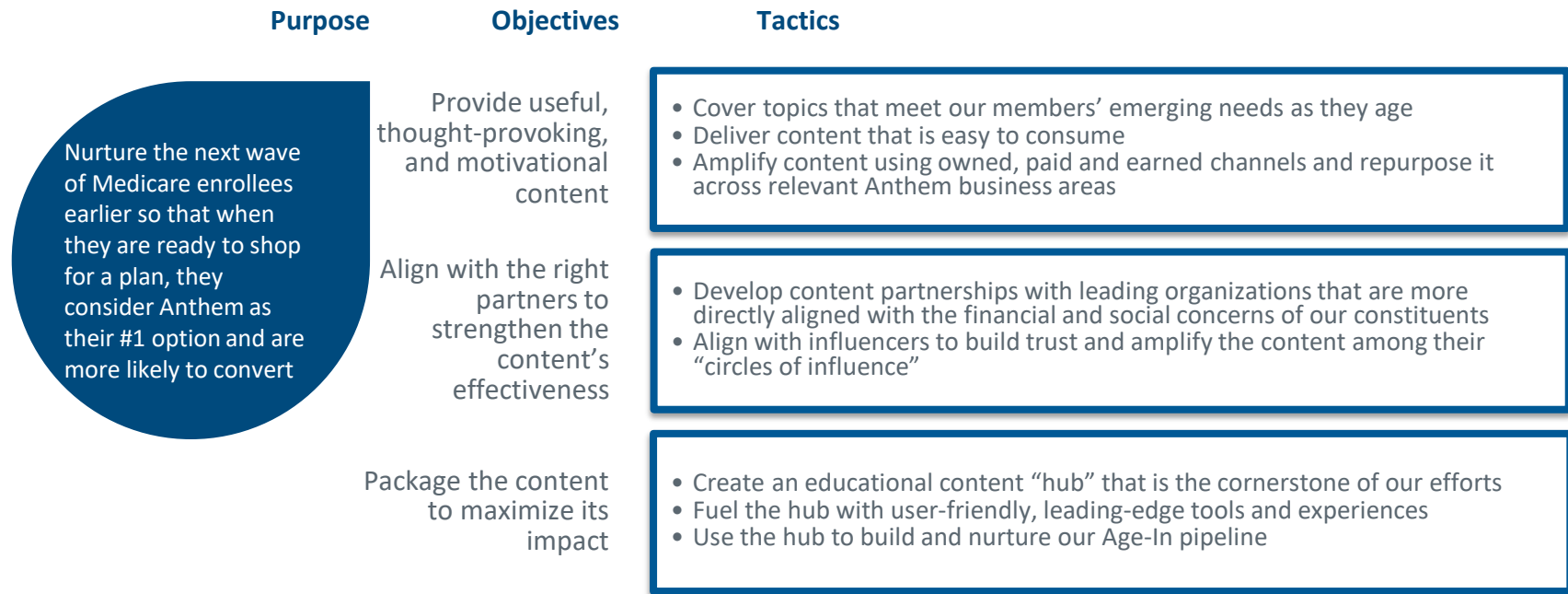


## Strategy and Activation Details

# To foster awareness and authority, we'll use a thoughtful, coordinated and differentiating content-centric approach

We'll leverage content marketing to engage "trailing edge" Boomers who face new and unplanned challenges as they age while positioning Anthem as their trusted partner during their years leading up to retirement and beyond.

★ As an added bonus, this content (and its distribution) isn't just relevant to our Commercial members. **Employers and brokers** can use it to educate themselves and employees/clients. Plus, most of these topics will be appropriate for our **existing Medicare members**.



# Integrating our educational content hub with current efforts will build a stronger Medicare pipeline for years to come

Today

Future State

Journey

Plan Selection & Post Enrollment

Evolve With My Needs

Audience

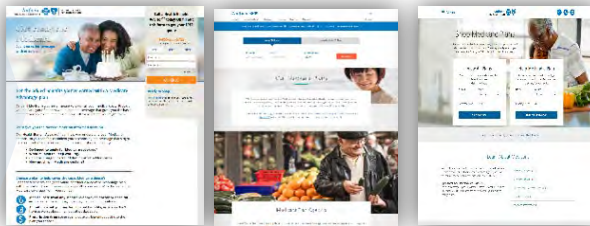
Turning 65 and 65+ Members and Prospects

60+ Commercial Members and Prospects

Experience

Traffic Drivers:

- Direct Mail
- Emails
- SEO
- Anthem Blog
- Digital Ads
- Move to Medicare



Distro Channels & Traffic Drivers:

- Email
- 60+ Newsletter
- Anthem Blog
- Native Ads
- Paid Social
- Influencer
- Marketing Collateral
- SEO



Purpose

- Provide information on Anthem's Medicare plans
- Enable shopping and purchase

- Simplify Medicare
- Address problems future Medicare members have with health care costs and planning
- Build reputation

Goals

- Generate Leads
- Drive Conversion

- Demand Gen
- Create Awareness
- Establish Trust
- Foster Loyalty
- Grow Satisfaction and Consumer Effort
- Lead Gen

## Problems for future Medicare enrollees.

- Almost three-quarters of those age 50+ say they wish they understood Medicare better.
- Age-Ins lag in retirement saving, due to underestimated costs, not enough income, or struggling to pay bills.
- Chronic diseases are on the rise adding to health care costs. Among trailing-edge Boomers, diabetes and obesity are more common.
- There's a lack of awareness in care trends like with understanding care options (in-home vs nursing care) and what consumer technology (telehealth, IOT) can improve their care.

# To create a robust, dynamic and distinctive Medicare education hub, it should include three major components:

## 1 Cover topics that meet our consumers' emerging needs as they age

Misconceptions about health costs when you're older

Medicare Isn't Free: Why It Costs So Much

*Unlike Medicaid, many Americans think Medicare is free. In fact, it costs seniors thousands of dollars per year.*

10 Options to Consider Besides a Nursing Home

Chronic illness complicates retirement planning

Climate Change Report Highlights Widespread Risks To Retirement Security

How innovative technologies help an aging population stay healthier and happier

Planning for an Unexpected Early Retirement

Does Medicare cover COPD?

Many Older Adults Can't Answer Basics on Medicare

*Survey finds that those nearing eligibility have much to learn before they turn 65.*

How to Be an Effective Health Care Advocate to Your Aging Parents

Limits on Medicare reimbursement for telehealth hurt rural healthcare

Over 55? Maximize your savings in this tax-advantaged account

7 Ways Medicare Will Improve in 2019

*Changes range from an early close of the donut hole to expanded Medicare Advantage plan benefits.*

## 2 Develop user-friendly, leading-edge tools that provide real value

Retirement Savings Calculator

Interactive Video

Downloadable Resources

Health Care Cost Calculator

## 3 Build and nurture our Medicare pipeline

Email Opt-in

Newsletter Opt-in

Download Form

# Content pillars: A closer look at what we talk about and why

| <b>Mission</b><br><b>Dedicated to empowering the next wave of retirees so they can plan better and make more confident decisions about their health care in retirement’s changing reality.</b>  |  |  |  |  |
|---|--|--|--|--|
| <b>Pillars</b><br><b>Medicare Literacy*</b> <b>Financial Planning</b> <b>Wellness and Disease Management</b> <b>Evolving Needs and Behaviors</b>  |  |  |  |  |
| <b>Rationale and Insights</b>   |  |  |  |  |
| <p>Almost three-quarters of those age 50+ say they wish they understood Medicare better.</p> <p>Lower health benefits literacy might contribute to a disconnect between what people say they want from an insurance product and what they end up choosing</p> <p>Age-Ins have more trouble understanding what specific services are covered as well as out of pocket costs and private Medicare plans.</p> <p>Rehabilitation, diagnostic services, and care for people with cognitive and neurological decline are increasing in demand, but aren't necessarily fully covered by traditional Medicare..</p> |  |  |  |  |
| <p>Age-Ins lag in retirement saving, either because they've underestimated costs, don't have enough income, or that they struggle with current bills.</p> <p>Many younger boomers feel they have yet to recover fully from the recession.</p> <p>Home ownership is at the core of their financial strength, but many will still owe on their mortgages well into retirement.</p> <p>Health care planning is a blind spot for financial advisors</p> <p>Those most in need of financial planning for health care will be the ones least equipped to afford a premium-based plan in retirement.</p>           |  |  |  |  |
| <p>Chronic diseases are on the rise adding to health care costs. Among trailing-edge Boomers, diabetes and obesity are more common.</p> <p>But health engagement, healthy habits and wellness knowledge among this group are higher too.</p> <p>Because of cost, many aging Americans have engaged in some type of behavior that could negatively impact their health, including: delaying treatment when sick; reducing spending on groceries; skipping routine/preventive screenings; not filling prescriptions; cutting pills in half</p>  |  |  |  |  |
| <p>Many prefer to stay in or near their home—or can't afford not to. For some, it's sentiment. Others lost value in their homes and savings during the recession.</p> <p>They lag well behind younger groups in having a smartphone and watch more traditional television.</p> <p>Many trailing-edge Boomers are interested in new technologies (e.g., telemedicine, voice and IOT) to support aging in the home. However, privacy and security are major concerns when it comes to connected health.</p>   |  |  |  |  |
| <b>Sample Topics</b>  |  |  |  |  |
| <ul style="list-style-type: none"> <li>• Medicare costs and considerations</li> <li>• How to compare plans and shop</li> <li>• What's covered, what's not</li> <li>• Trends in enrollment and benefits usage</li> <li>• New or changing laws</li> </ul>   |  |  |  |  |
| <ul style="list-style-type: none"> <li>• Retirement planning for health care costs</li> <li>• Socioeconomic challenges of climate change on health and medical costs</li> <li>• Implications of an unexpected illness or retirement</li> </ul>  |  |  |  |  |
| <ul style="list-style-type: none"> <li>• Wellness and DM focused on seniors</li> <li>• Nutrition, housing, transportation, and other social needs.</li> <li>• Provide tools to help manage chronic conditions.</li> <li>• Implications of living in a "care desert"</li> </ul>  |  |  |  |  |
| <ul style="list-style-type: none"> <li>• Choosing the best care options</li> <li>• Caregiving tips and support</li> <li>• Independence and home safety</li> <li>• Care availability in desired retirement spots</li> <li>• Personal care and long-term care support services.</li> </ul>  |  |  |  |  |

\*Pillar names are internal-facing and may be reworked creatively for a consumer audience.

Sources: Anthem 2018 Commercial Age-in Leakage Study; 2018 Medicare Age-in Study (Deft); 2017 Medicare Shopping and Switching Study; Understanding the next wave of Medicare enrollees (Deloitte 2017); Younger Baby Boomers: Gauging Their Digital Usage and Auditing Their Finances (eMarketer 2018)

# Activation plan and resourcing

| Objective  | Recommendation  | Dependencies   | Resourcing Needed (+ ~ Funding)  | Immediate Next Steps  |
|--|---|--|--|---|
| <b>Provide useful, thought-provoking, and motivational content</b>             | <ul style="list-style-type: none"> <li>Cover topics that meet our members' emerging needs as they age</li> <li>Deliver content that is easy to consume</li> <li>Amplify content using owned, paid and earned channels and repurpose it across relevant Anthem business areas</li> </ul>                       | <ul style="list-style-type: none"> <li>Resourcing needed to support for content planning, production, reviews, publishing (and filing with CMS when necessary) and performance analysis</li> <li>Use of content across Employer/Broker and Medicare membership will need to be coordinated with the right business partners</li> </ul> | <ul style="list-style-type: none"> <li>FTE Strategist/Program Manager to oversee strategy execution across all objectives, including partner cultivation, nurture campaign and reporting</li> <li>FTE Content Manager to manage all aspects of initial and ongoing content planning, production, distribution and tagging</li> <li>Content development by agency partner(s)</li> <li>Paid media</li> </ul> | <ul style="list-style-type: none"> <li>Estimate content volume and associated costs</li> <li>Share plan with partners in Medicare Membership and Employer/Broker Marketing to identify opportunities for reuse</li> </ul> |
| <b>Align with the right partners to strengthen the content's effectiveness</b> | <ul style="list-style-type: none"> <li>Develop content partnerships with leading organizations that are more directly aligned with the financial and social concerns of our constituents</li> <li>Align with influencers to build trust and amplify the content among their "circles of influence"</li> </ul> | <ul style="list-style-type: none"> <li>There has been one high-level conversation with NCOA on content sharing and co-creation. They are interested in possibly something even more robust.</li> <li>There may also be regulatory constraints we will need to comply with.</li> </ul>  | <ul style="list-style-type: none"> <li>Partnerships: Medium to significant financial investment depending on who we work with and how elaborate the partnership is Influencers: Influencer marketing agency support</li> </ul>   | <ul style="list-style-type: none"> <li>Assess partnership recommendations, prioritize opportunities and develop plan</li> <li>Develop crawl, walk, run proposal for NCOA</li> </ul>                                       |
| <b>Centralize the content to maximize its impact</b>                           | <ul style="list-style-type: none"> <li>Create a content "hub" that is the cornerstone of our efforts</li> <li>Create user-friendly, leading-edge tools and experiences</li> <li>Use the hub to build and nurture our Age-In pipeline</li> </ul>   | <ul style="list-style-type: none"> <li>The hub will need to be resourced – for planning and requirements, design and UX, building, and ongoing care and feeding.</li> <li>Will need to develop nurture program and reconcile with member newsletter.</li> </ul>  | <ul style="list-style-type: none"> <li>Site planning, design and build</li> <li>Ongoing technical and creative maintenance</li> <li>Technical and creative development and deployment of ongoing email campaign</li> <li>Data support for email deployment and analytics support for performance measurement</li> </ul>  | <ul style="list-style-type: none"> <li>Map out high-level requirements for All and prioritize</li> <li>Identify MVP elements</li> <li>Assess "build vs buy" options</li> <li>Map nurture campaign experience</li> </ul>   |

This work should be done in coordination with all other Age-In efforts to drive efficiency and consistency.

# What does success look like?

Our KPIs will span the customer lifecycle



## Awareness

- Metrics may include:
- Reach
  - Media impressions
  - Traffic
  - Content views



## Affinity & Trust

- Metrics may include:
- Email engagement
  - NPS
  - Foresee data
  - Medicare retention rate (if utilized for those members)



## Leads

- Metrics may include:
- Form submission
  - Form abandonment
  - Email engagement
  - Cost per lead



## Conversion

- Metrics may include:
- Member conversion
  - Non-member conversion
  - Leakage rate



By its nature, **Content marketing is a slower burn** and these are efforts focused on the long-term – many members won't be ready to convert for several years – and results will build over time. **As momentum builds, so will conversion.**

**However, by standing up an MVP quickly as POC, we can drive immediate and measurable results in 2019.**



## Next Steps

- Secure funding
- Coordinate approach with internal teams
- Assess “Buy vs Build” content options
- Prioritize tactics
- Develop roadmap



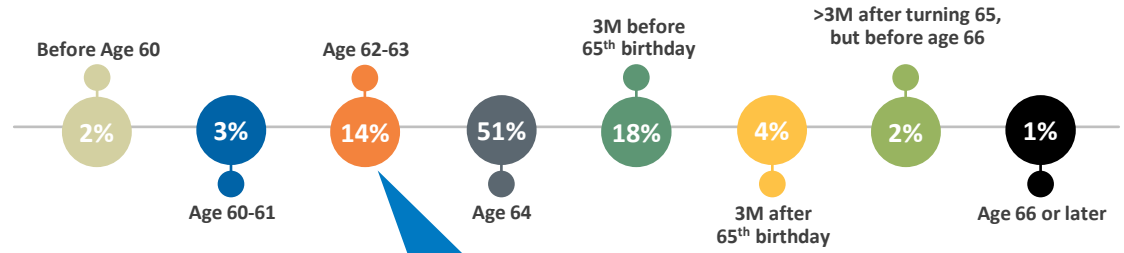


# Appendix

# Age When Actively Looked into Options For Retirement (Total Audience)

A majority (69%) of lost age-ins began looking into post-work health insurance plans at age 64-65; those looking at age 62-63 more likely to now have Medicare Advantage

Age Considered Health Insurance Options for Retirement



Age-ins who enrolled in Medicare Advantage significantly more likely to look at this stage than Medicare Supplement (20% vs. 12%)

|                               |    |
|-------------------------------|----|
| Never actively looked into it | 4% |
| No answer                     | 3% |

Q14a. At approximately what age did you begin to actively look into and think about health insurance options for when you stop(ped) working at age 65 or later?