



Naming & Repositioning Medicare's Fee-For-Service Product

Relevant Components

- Healthcare product positioning
- Product name development
- Q methodology
- Positioning strategy
- Brand architecture

Findings

Three distinct points of view emerged from this study, which led to four potential names and positioning statement recommendations. The findings suggested that the FFS name should reflect an “organization-brand-product” relationship that would work equally well with other products, including managed care plans, a modernized FFS product, and private FFS plans. From a strategic perspective, we recommended that naming the traditional FFS product effectively will require CMS to make a commitment to develop a strong and strategic identity for the Medicare program overall. If the commitment is made, and at a high level within CMS, then naming the FFS product as part of an overall Medicare identity and positioning effort would prove very powerful indeed.

The Challenge

CMS, the federal Medicare agency, recognized that its beneficiaries were getting increasingly confused as more and more competing Medicare products came to market. We were engaged to help the agency re-position the traditional “fee-for-service” (FFS) Medicare program by developing a new label that would distinguish it from the myriad of competing plans. This required understanding Medicare enrollees’ (1) perceptions of the features and benefits that Medicare products offer (2) understanding of the similarities and differences between both traditional FFS and Medicare managed care plans, and (3) identification of what names would be most effective to differentiate and communicate the unique value of the FFS product.

The Results

As a result of our project, CMS had clear answers and a way to move forward that addressed their main objective –how to position, name, and communicate the FFS product to beneficiaries. We developed “cognitive maps” reflecting the target audience’s understanding of the Medicare program and its products, and a clear picture of how they made decisions about Medicare.

The Methods

The project was conducted in three phases. The first exploratory phase focused on determining how beneficiaries make decisions about Medicare enrollment, how they compare FFS and managed care products, and how they cognitively map their perceptions about the Medicare program and products. The aim was to develop positioning statements and names for the traditional FFS product, and differentiating communication strategies, for phase two testing. In the second phase, we utilized a hybrid focus group/ Qsort methodology to identify the best names and main positioning strategy for the traditional Medicare product. Phase three was strategy formulation and creative name development, based on the voice of the customer.