MARKETING READINESS ASSESSMENT

| Service Line/Client | | |
|------------------------------------|--|--|
| Service Line Lead | | |
| Marketing Lead | | |
| Executive Lead | | |
| Strategic Marketing Priority Level | | |

The questions below should be answered by the service line leader and executive sponsor of the service line, along with the Marketing lead. The answer to the first question under each criterion is yes or no. The other questions require information to explain the status of each criterion.

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| Criteria | Questions | Y/N | Explanation |
|--------------------------|--|-----|-------------|
| Annual Plan | Does this request align with/fulfill an element of the annual operating plan? | | |
| | How does it support the organization? | | |
| Leadership | Is there a leader in place that can manage the business-side of this service line and partner with the marketing team? | | |
| Profitability | Is this service line profitable? | | |
| | What is the profit margin? | | |
| | What challenges may stand in front of the profitability of this service line? | | |
| | Will these challenges impact the ability to market this service line? | | |
| Capacity | Is there room to take on more volumes for this service line? | | |
| | Is this service line profitable to the point where we would want to find ways to expand capacity? | | |
| Competitive Situation | Are there competitors for this service line in the marketplace? | | |
| | What competition exists in the marketplace for this service line? | | |
| | What are the strengths of the competitors? | | |
| | What percent of market share do we have? | | |
| | Is there evidence that we can capture market share? | | |
| | What is our market position? | | |

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| Criteria | Questions | Y/N | Explanation |
|------------------------|---|-----|-------------|
| Differentiation | Is there a differential advantage for this service line? | | |
| | What differentiates this service line from other competitors in the marketplace? | | |
| Customer Experience | Does this service line have positive patient experience scores? | | |
| | Are there issues around patient experience that may impact ability to grow volumes? | | |
| | Do physicians have a good experience referring to this service? | | |
| Customer Service | Does this service line have a phone number that the public can call to get information? | | |
| | Who answers that number? | | |
| | Has this been tested for customer service? | | |
| | Are calls tracked? | | |
| | Does this service line have a phone number that physicians can call to refer patients? | | |
| | Who answers that line? | | |
| | Has feedback from physicians been sought related to customer service, etc.? | | |

Missing Information/Data:

Recommendation from marketing team based on readiness of service line for marketing:

| Do we want to secret shop this service line? | Yes No | | | | |
|---|--------|--|--|--|--|
| Is this service line ready to be marketed? | Yes No | | | | |
| If not ready for marketing, timeline for adjustments, review: | | | | | |
| | | | | | |

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