About c2b solutions
Founded in 2012, c2b solutions consults with healthcare organizations on marketing and sales strategy using deep consumer insights, helping them succeed in a Healthcare Reform environment.

With over 50 years of experience leading marketing and sales teams and applying consumer insights to drive business growth at P&G Healthcare, the partners of c2b solutions can Consumerize your Business.

c2b solutions conducts extensive market research on the needs, wants, attitudes and motivations of healthcare consumers and has developed a psychographic segmentation model that is 91.1% predictive of consumer behavior within segments based on these consumer’s approach to health and wellness. These insights will empower healthcare organizations to develop consumer-preferred products and services and maximize its communications (marketing, education) tailored to specific patient types.

Interview conducted by:
Lynn Fosse, Senior Editor, CEOCFO Magazine

CEOCFO: Mr. Freeberg, what is c2b solutions?
Mr. Freeberg: We are a consumer health care organization or consultancy, and we have looked at the health care market and observed that a “one size fits all” mentality among health care providers and health care payers does not fit today’s world. You have to motivate people based on who they are – their motivations and preferences - so we have created a psychographic segmentation model of health care
consumers that allows for customization of messaging and product offerings. Essentially, we are a data/insights organization.

CEOCFO: *How does that play out day to day?*

*Mr. Freeberg:* It can be used by different people in different ways, so I will start with a very basic example. We had a Fortune 15 organization come to us as an employer that said they had a high number of diabetic patients among employees that were driving their healthcare cost at a higher than average level and they would like to get that under control. They put a program in place, and it was the right thing to do, very high touch and very high cost per employee. Just doing that by itself, they were getting about 55 percent of their target audience to sign up for this on-site behavioral modification health course. Their ultimate goal is to get 100 percent of eligible employees to participate, but they set a target goal of 75 percent with the health coaches with whom they were working. We came in and worked with the company that was providing the on-site education and customized the message based on who each of the employees were as it relates to our five health care consumer segments. Instead of making the pitch to sign up for this the same way every time, they customized that pitch based on our five segments, and they got 73 percent of the people to sign up. What we are able to do is essentially enhance the communication effectiveness for healthcare among employers, ACOs, hospitals, provider organizations, payers and pharmaceutical companies simply by understanding that all individuals are not created equally and customizing messaging accordingly.

CEOCFO: *How do you address each client’s problem?*

*Mr. Freeberg:* As with any insights, they have to be data driven and proven. We did a 4,800+ consumer study across 384 different health care measures to understand what consumers’ attitudes and behaviors were, and then we segmented those 4,800 people into five groups based on motivations and approaches to health and wellness. You could segment consumers into four, six, eight groups or more, but what you want to do is get a number that is manageable, that is realistic to use and is not overwhelming for a hospital. For example, say there are 20 different types of consumers that come into a hospital. Understanding their unique motivations and preferences is too much to deal with. Essentially, knowing millions of data points about a manageable 5 segments, because you have their demographics, psychographics, behavioral tendencies and attitudinal data, provides the necessary depth, with an actionable number of segments. We have that information on U.S. healthcare consumers, in general, and for our psychographic segments, specifically, in a database that you could purchase. It is a smart database where you can pose inquisitive business questions. For instance, you might want to know who are the women, age 40 and above, that shop at Kroger for their prescriptions and also have osteoporosis. As a marketer, if you want to target this group, the analytics tool will isolate them and will provide you with a myriad of behavioral and attitudinal information – in other words what those people are doing and thinking across multiple touch points of the healthcare system. The psychographic data, then tells you *how* to optimize your communication with them. We offer this data as product, but it takes human resources to operationalize the data and turn it into strategy and tactics. In some cases, organizations simply do not have the capacity to do this and they will hire us to do it for them.

CEOCFO: *What about when you come in and revamp up a program that is already in place?*

*Mr. Freeberg:* That has frequently been the case during the last two years, as we we’re very focused on developing real-world, proof of concept, business cases. Inherently, we know that this works, and how
we know is because my two partners in this endeavor were former Procter & Gamble employees. They were individuals who had hired me in my previous capacity as a consultant, so I worked with them for many years. P&G is, as you know, very adept at really understanding specifically who their prime prospect consumer is and what this consumer’s needs, attitudes, and behaviors are. What allows them to dominate commodity categories and own greater than-50 percent of the global detergent market – well, the only way you can do that is to really understand what those unique motivators are across the population you targeting and drive the activity that you are looking for. My partners actually applied this approach in health care when Procter & Gamble had a pharma business. When P&G sold pharma and the stars aligned, we talked and said this was an opportunity to take that capability out into the marketplace. We believe, there is a high need for this in health care, because the health care system in the United States is extremely effective, good and expensive. It is also very “one-size fits all.” If you and I follow each other into a doctor and happen to have the same diagnosis and follow up, they are going to say the same things to you and me even though we are certainly hardwired a little bit differently, and quite possibly very differently.

CEOCFO: Are most organizations aware that they need to be more on target and they need to look for the nuances?
Mr. Freeberg: The organizations that are providing care are at the front-end of health care reform and are all-in as it relates to the ACA-type activity. These organizations are like the Affordable Care Act itself, in that their intentions are sound, but the mechanisms to achieve them are not as clear.

The Affordable Care Act is interesting in that it says we want to have very high quality care, we want the patients to have a great experience, and we want to do that at a much lower cost. The ACA incentivizes these outcomes, but does not tell them how to do it. This is because the government does not necessarily know how to do it either. All those organizations that are affected by this enormous driver are aligned in they want to do the right things, and they want to achieve the goals. They want to keep people from being readmitted 30 days after procedure. They want to make sure people have a great experience when they come through the system and they want to manage costs effectively. They know where they want to go, they just do not know the best way to get there. I would say organizations may not consciously know that they need to take a more effective communication approach or employ a segmentation model, but they know they need assistance in many areas to get this done. They are very open to these ideas, but they have not been actively looking for the solutions c2b solutions offers. There is an awareness gap for sure. However, there is a higher level of awareness among medical device and pharmaceutical companies, and even payers have a higher level of awareness because they have been dealing -- at least an arm’s length -- with the patient as a “consumer” for a longer period of time.

CEOCFO: How are you encouraging people to know c2b solutions and the value you provide?
Mr. Freeberg: We have been focusing on the process of building out our capabilities, the proof of concept and case studies, as well as partnering with organizations that can provide the technological support for our type of data. We are not a tech company, we are an insights and data organization, but there are some effective technologies that can be used to leverage our insights and data. This is kind of how we see ourselves in layman’s terms -- like the “intel inside” -- and we are happy to be integrated with a lot of different technologies and products. We have
been laying the foundation there and building our digital presence, and we just started our PR campaign. We are at the point now where we are trying to create awareness and scale that way.

**CEOCFO: What steps are you taking?**

**Mr. Freeberg:** We are doing a fully loaded PR campaign with press releases, interviews and editorials. We have a marketing partner, Cleriti, that works with us and is managing that end of it.

**CEOCFO: Can you reach out to everyone everywhere with the same message?**

**Mr. Freeberg:** The idea is to scale through technology and scale through partnerships to leverage things that do not necessarily require a high level of human capital. There are the opportunities for partnership with c2b solutions and for a larger entity to scale us up. We are working with data compilers and we have worked with a couple of technology firms. It enhances their product; for example, an automated patient engagement platform that handles all of a hospital’s outbound phone calls, memos and emails to patients can integrate our data into that system to make it more effective and valuable to the health care provider, because it customizes messaging in a way the resonates with different patient types. We are getting a licensing fee or royalty off of that. We are not only going out and putting this in the marketplace; we are able to put it in the right hands to get it out in the marketplace.

**CEOCFO: Is the technology integration the partner who deals with that? How have you made it easy and at the end of the day does the user friendliness come from the system or from what you have added to it?**

**Mr. Freeberg:** We have been very cautious about our technology partners. There is an issue in health care in which the technologies we use every day outside of health care are seemingly far advanced from what happens when in a hospital or physician’s office. They are still behind the curve relative to an integrated IT structure. We have been cautious to not partner with organizations that -- whether it is true or not - - have a less-than-stellar rep from the user experience because of an expectation gap or lack of user understanding. We have really looked at partnering with organizations that have high credibility with our client target audience, and facilitate a very “behind the scenes” approach. For example, our platform can be resident within or behind an electronic health record so that it is invisible to clinicians. The system can identify the patient type, or psychographic segment, and push out messaging -- medication reminders, discharge directions, education -- in a language and method preferred by those patient types. We believe this can be a more effective way of integrating our insights without disrupting an organization’s or clinicians’ processes.

**CEOCFO: Is it easy to gain entry to the people you are looking to reach?**

**Mr. Freeberg:** The offering is unique. It is not hard to get entry, but it is sometimes hard to get traction because conceptually it is not something that everyone is familiar with. People understand it from a conceptual standpoint. They do not understand how to make it work for them. That is where the technology piece comes in. It is our opinion that every health care system in the United States could benefit from deeply understanding their patients, segmenting them according to motivations, and being more cognizant of the interaction with those individuals. In doing so, they would have a much higher rate of return on their patient experience, their marketing and advertising, and the response to their communications. However, health systems typically do not have individuals who are dedicated and capable of doing that type of assessment within the system now. They are strained for capital. The
solution we offer is to make it easy for them, to find that technology partner that allows for the segmentation and the understanding of the insights that take place behind the scenes automatically, without human capital. It has to be easily integrated with their system.

**CEOCFO: Are you funded for the steps you would like to take next?**

**Mr. Freeberg:** We have been self-funded from personal savings and bootstrapping the entire way.

**CEOCFO: Why pay attention to c2b solutions right now?**

**Mr. Freeberg:** c2b solutions, consumer insights and our resources applied correctly can actually change the way health care is delivered in the United States.

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**BIO:** As President and CEO, Rob is responsible for driving the strategies that ensure the organization delivers on the c2b mission: “Help organizations achieve superior business results in a healthcare reform environment through consumer insights and business solutions”.

Additionally, Rob spends significant time in client development and engagement, identifying and vetting potential strategic partnerships, as well as, overseeing all of the financial, technology, marketing and human resource affairs of the organization.

Prior to his current role at c2b solutions, Rob held the position of Vice President at a boutique Healthcare Consultancy from 2004-2007. He was named Partner in 2008. In addition to leading two primary client teams, Rob was responsible for the Market Research Practice. In this role, he led the development of multiple products including the Personnel Assessment Report (PAR), the Equity Scan and Market Drivers Report.

Rob was a National Health Systems Director for Yamanouchi Pharma America (YPA). In this role, Rob headed the Health System’s technology initiatives and developed the field integration plan.

Rob also spent 11 years with Schering-Plough (SP). As he progressed through positions of increasing responsibility within sales, sales management, and marketing, Rob was consistently recognized for his accomplishments. In 1997 Rob moved to SP Managed Care where he held positions in regional and national account management. Rob was subsequently promoted to Senior Manager, Field Force Effectiveness where he was responsible for building and implementing a comprehensive Managed Care training and development platform for the organization.

Rob holds a Bachelor of Science degree in Organizational Behavior from Miami University.

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