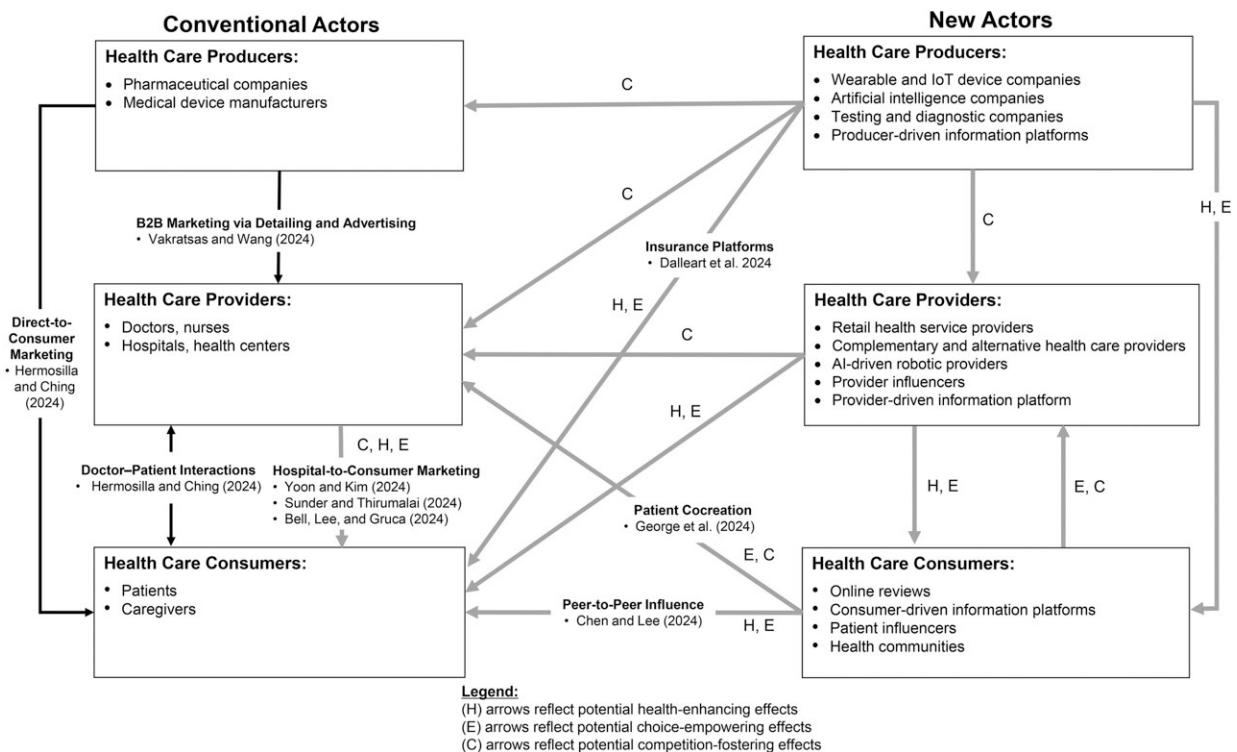


Exploring the role of marketing in disrupted health care markets

November 29 2023, by Marilyn Stone



How New Health Care Actors Are Disrupting Health Care Exchanges. Credit: *Journal of Marketing* (2023). DOI: 10.1177/00222429231213154

Researchers from Duke University, University of New South Wales, University of Wisconsin, and University of Washington published an editorial for the *Journal of Marketing* that calls for marketing to tackle the challenges and opportunities in dynamic contemporary health care

markets.

The [editorial](#), introducing a special issue on "Marketing in the Health Care Sector" is titled "[Marketing in the Health Care Sector: Disrupted Exchanges and New Research Directions](#)" and is authored by Christine Moorman, Harald J. van Heerde, C. Page Moreau, and Robert W. Palmatier.

The special issue editors introduce a series of articles that offer novel contributions regarding marketing's role in the [health](#) care sector as well as a research agenda outlining more opportunities for marketing scholars to examine whether and how these disrupted exchanges are improving health, empowering choice, and fostering competition.

Health care is vital to our interconnected world, and, as demonstrated during the COVID-19 pandemic, societies are deeply affected by its successes and failings. Over the last decade, health care has been disrupted on both the demand and supply sides, and these changes have impacted the creation, provision, and consumption of health care in fundamental ways.

However, the role of marketing in this dynamic health care industry remains only partially understood and is often focused on conventional strategies such as business-to-business transactions (e.g., detailing or advertising to doctors) and business-to-consumer transactions (e.g., direct-to-consumer advertising).

"While important," Moorman explains, "this limited view ignores the new actors, roles, and exchanges that characterize disrupted health care markets. As a result, the [health care sector](#) is not acting on the full range of opportunities associated with these changes, including understanding their effects on consumer welfare."

At the heart of the editorial lies a set of disrupted exchanges involving conventional and new health care producers, [health care providers](#), and health care consumers. Health care producers refer to those who develop health-related products, services, and information, even though they do not administer health care directly to patients.

Health care producers come in two categories: i) conventional health care producers (i.e., pharmaceutical and medical device companies); and ii) new health care producers (i.e., technology and diagnostic companies).

Health care providers deliver information, products, and services to consumers. These providers also come in two categories—traditional providers that include doctors, nurses, hospitals, and [health centers](#) as well as new providers that include retail health care providers, complementary and alternative health care providers, and physician influencers who preach their health gospel to the marketplace.

Health care consumers receive and use information, products, and services created by producers and providers. Traditionally, they are exclusively on the receiving end of value. In today's health care systems, however, consumers may also be peer creators of value when they participate in health care communities, provide reviews, and/or become influencers.

The editorial focuses on two types of disrupted exchanges: i) the influence of new actors on their conventional counterparts and ii) the influence of these new actors on one another. It observes a merging of roles across producers, providers, and consumers manifesting in a "race to the provider role" that is disrupting many exchanges and changing consumer and firm behavior and the operation of these markets.

The editorial identifies the initial potential impacts of these disrupted

exchanges on three outcomes. The health-enhancing impact refers to how mental and physical health outcomes might be improved. The choice-empowering impact refers to the degree to which consumers have an actual or perceived improvement in their ability and motivation to understand and make health-related choices.

One concern is that more information does not always equate to better choices. The competition-inducing impact refers to the degree to which the change fosters competition that improves quality, increases access, and lowers prices. These competitive effects are determined by whether consumers use new health care exchanges as substitutes or complements. If used as substitutes, disrupted exchanges may spur competition. If used as complements, the effects may be minimal or produce beneficial partnerships in the industry.

More research is needed to assess how the marketplace will be transformed and how marketing might contribute in positive or negative ways. Will health be improved, choice enabled, and competition fostered on quality care, access, and lower prices? Or will health be managed differently, but with no effects on morbidity and mortality, more confusion than empowerment, and more competition but no welfare gains?

"We see an enormous opportunity for the marketing discipline to help understand and address the complexities arising from the unprecedented pace and level of change in health care exchanges. Asking questions about how the new actors and new roles are participating in these exchanges and to what end in terms of health, choice, and competition outcomes is a valuable role we can play," says van Heerde. The editors invite contributions to creating a stronger role for marketing in the study and management of [health care](#).

More information: Christine Moorman et al, Marketing in the Health

Care Sector: Disrupted Exchanges and New Research Directions,
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