



AT THE HELM

Jay Bigelow, president

PERFORMANCE

Numbers were down overall but predicting 20% growth for 2010

HIGHLIGHTS

Wins include rebranding for Carolina Medical Advanced Technologies Center of Innovation, which was renamed ibiliti, and work for Akrimax Pharmaceuticals

Continued diversifying its client base with non-pharma accounts

CHALLENGE

Dealing with continued acquisition and downsized budgets on the pharma side

For contact details, service offerings and client roster, see Agency A-to-Z, beginning on page 171

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—Jay Bigelow

MicroMass Communications

Shop broadens roster with non-pharma accounts, predicting winning year



You could be forgiven for thinking that MicroMass Communications, at the tender age of 16, might not have enough resilience and staying power to fend off the economic elements that battered healthcare marketing agencies up and down the East Coast throughout 2009. Not so.

“Overall, our numbers were down,” says Jay Bigelow, president of the Cary, NC-based agency, “but I think we weathered the storm better than a lot of others did.”

Bigelow attributes his agency’s robustness to three key factors: First, that MicroMass has a highly diversified client base. “We don’t have any client that represents more than 20% of our business.”

Second, that most of the work it does has measured outcomes, “making it easier for marketing to justify, and harder to cut, when they know they get a return on their investment.”

And finally, that it builds integrated marketing programs that touch multiple constituents at multiple touch points, “so we’re not dependent on a media spend or a media dollar to drive our revenue.”

MicroMass is a 65-person digital shop focusing on a mix of relationship marketing, advertising, interactive and branding work for clients such as Novartis Oncology, Merck, Shire, GlaxoSmithKline, Auxilium and Akrimax. But what differentiates it from the pack,

says Bigelow, is the ability to apply behavioral science to marketing communications business challenges.

Besides, he insists, the term “digital agency” will go away.

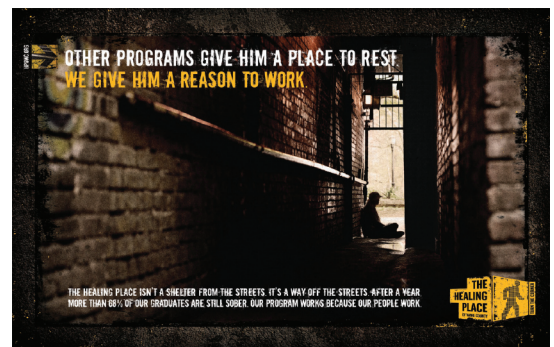
“Part of the challenge for [some of] the older agencies is that the space is still evolving; apps didn’t even exist a couple of years ago, but now you have to understand how to build and deliver one,” says Bigelow. “Then there’s social media...we all want to do it and we all think we know what it is, but the reality is it’s still nascent and it’s not going to be settled anytime soon. People are still trying to figure out how to live in that space.”

When it comes to the latter, MicroMass is certainly doing a lot of research into how to do it well, but so far it has been difficult for clients to execute “real” campaigns. “We had a platform we built for one client two years ago that we still can’t get approved by medical,” says Bigelow to illustrate his point.

And he doesn’t believe that the highly anticipated FDA guidelines will necessarily change anything overnight. “If they’re like any other DDMAC guidelines, they’ll be out of date by the time they come out, and that will be enough reason for lawyers and folks to say ‘We shouldn’t do this.’”

Nevertheless, Bigelow feels that brand teams are looking for smarter solutions in digital that go beyond building websites, but that integrate digital into the overall marketing strategy. “Clients are saying, ‘We don’t want a separate digital effort, we want it to complement what we are doing in other channels.’”

MicroMass is off to a good start in 2010, with Bigelow predicting 20% growth for the year. He con-



Above: Pro bono ad for The Healing Place, a nonprofit recovery center; Top: A site and hat advertising ibiliti

tinues to diversify the roster, already picking up a couple of non-pharma wins, including a medical device manufacturer.

“Healthcare is much broader than pharma,” he says. “We’re looking for clients who share our beliefs in what marketing can do, how it works, what a strategic marketing partner looks like, how they show up and what they bring to the table.”

He continues: “Devices, nanotechnologies, personalized medicine...that’s where healthcare is going so if you want to be an agency in this space you’ve got to be out there, too.” —James Chase