

ARCHITECTONICS OF HEALTHCARE MARKETING

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Abstract

In a commercial environment, marketing provides universal knowledge and structures an effective management approach to overcome the contradictions between supply and demand. Differences that could be much more enhanced and sensitive in the healthcare sector. Applied at different levels, healthcare marketing is fraught with over-expectations: to be part of the solution of fundamental problems in the healthcare system, such as the adequacy, accessibility and quality of health care, the resource and activities efficiency, the creation of a service culture focused on the patient's needs, the "emancipation" of the healthcare market from the pursuit of selfish interests, the stimulation of technological progress, the rise of public prestige and the satisfaction of those working in the system. Marketing has a central role in the management of healthcare organizations. In this context, the article theorizes leading marketing concepts in attempt to build a common analytical and organizational management framework of marketing in healthcare. There are different elements in the architectonics of healthcare marketing - the concept of exchange plays the role of the "philosopher's stone", upon which the key elements of marketing are built on - needs, necessities, demand, products, satisfaction, market – which the marketing tools roll into the logic of the marketing process. The article discusses a number of questions, whose theoretical summaries lead to practical answers: how to combine the acquisition value for the client and the added value for the organizations; how to define key marketing concepts and management tools in the specific context of healthcare, etc.

Keywords: marketing, healthcare marketing, marketing exchange, needs, wants, demand, healthcare market, healthcare services, marketing process, demand of healthcare

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INTRODUCTION

The marketing is everywhere. Healthcare is no exception; the health system is not free of marketing territory. Visible proof of this is the spread of the lexicon of marketing; as well as the professions of health marketers in large hospitals and the growing private health sector. Marketing terminology is easily associated with words such as hospitals, doctors, medical products / services, medicines, health insurance, patients, treatment, medical equipment and order. etc. Only 20 years ago, sharing this lexical environment in our country was part of the professional jargon of a relatively small group of health economists and professional managers. Nowadays, it is considered normal to talk about health management, the health market, the demand for health products / services and competition; patients are defined as clients /users, doctors'/ health institutions as health care providers, treatment as a production process, etc. All this reflects the attempt to seek more adequate explanations for the fact that healthcare is a functionally integrated part of society, embedded in a diverse and increasingly complex system of public exchange.

The questions are always "about the other side" in the field of marketing, and what connects us. As a concept, marketing summarizes the connecting efforts of participants in the most widespread social environment for exchange, such as the market.

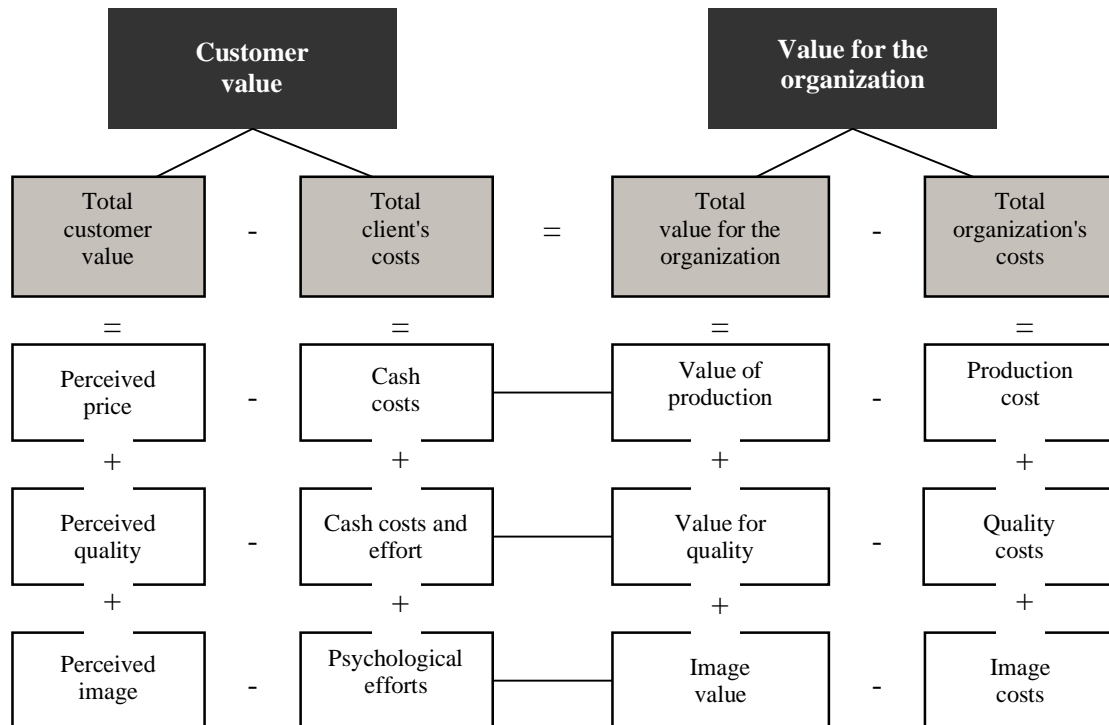
THE BASIS: THE CONCEPT OF EXCHANGE

In a market environment, organizations compete by providing more valuable offers to their customers. They must provide an offer that consumers consider to be of greater benefit, obtained at a lower cost, with less time, with easier access and with less physical and mental effort. When consumers choose the offer that brings them higher value, their choice works as a basic selective principle that constantly stimulates the offer to open opportunities and provide increasing value for their customers. But this is one half of market success, a prerequisite for organizations to find economic meaning in their activities. They must not only provide desired and sought-after offers from consumers, but also do it better than others, their competitors - more rationally, more productively, more efficiently. Their proposals must bring them higher added value. In order for an organization to be successful, it must meet both conditions simultaneously - to bring higher value to its customers and to itself. And in the order indicated, not the other way around. Higher consumer rating is a necessary condition for higher added value; only then do organizations have a market reason to measure themselves against each other on the basis of added value.

The increase in value for both parties in market mechanics is not a zero-sum game. On the contrary, the motivations in the actions of both parties are mutually supportive and stimulating. If the goals of consumers are reduced to maximizing the value they receive (Figure 1), and the goals of organizations are summarized as maximizing their added value, the equilibrium situation between them is one in which the two goals are achieved and generally equal. Philip Kotler describes this pattern of behavior as follows: "Customers judge which proposal brings them the most value. ... They form an expectation of value and act in harmony with it. Satisfaction and the probability of a purchase depend on whether the expectation will be met or not. ... The value acquired for the customer is the difference between the total value for the buyer and his total costs." (Kotler, 2001). More specifically, obtaining higher consumer value means producing new or improved products, better service and expanding consumer access, and the increase in added value for the proposing organization is the result of more economical use. of resources and / or greater productivity. The two value perspectives are shown in Figure 1, and each is presented as the difference between the value received by customers and the organization and their respective costs. Customers are considered to be the only source of value for the proposing organization, which gives grounds to equate the costs of the clients with the value for the proposing organization. Figure 1

emphasizes that value and related costs include different elements; they are summarized in three important countries - production, quality and image. The conversion process is shown for each cost/ value element, outlining the horizontal chains that connect customers and manufacturers.

Figure 1. Customer value and value for the organization



Connecting the two points of view to value in the way shown illustrates the logic of economic interaction. The "holographic" picture of value (Figure 1) shows managers what their decisions should be based on. The increase in added value for organizations is determined in market conditions by consumer preferences, and winning and retaining customers is the result of differentiated efforts in terms of price, quality and image.

Receiving higher added value means that your offer is rated by users as more valuable than the previous one or compared to other ones. This means that the offer should be found more attractive by customers in at least one of these elements and its weight will be decisive for their overall choice. A long-term balance is needed to achieve a mutually beneficial exchange of values that guarantees maximum value for both parties. Organizations that aim to maximize their added value by increasing the added value for their customers can be identified as competitive.

BUILDING ELEMENTS: CONSTRUCTION OF MARKETING

Marketing occurs when people meet their needs through exchange. Understanding the conditions, processes, forms and benefits of exchanges is important for understanding marketing.

Marketing is an activity related to the management of the network of (economic) exchanges in which the organization participates. As shown, exchange processes are central to any organization and this defines marketing as a business function of management (Kotler, Kartajaya, Setiawan, 2017). The task of marketing is to ensure the reproduction of an ever-increasing, mutually beneficial exchange of values. This is achieved by balancing supply (immediate marketing objects)

according to needs and demand. Needs, requirements and the resulting demand are considered as a variable independent of management. The active party in this process falls to the organizations - they must develop and submit an offer that the other party - consumers, to assess as acceptable and competitive with others like it. Exchanges (usually in the form of transactions), provided that customers have the opportunity to choose and the information they need, is the "proof" that in each act of exchange the necessary balance has been achieved and marketing has done its job. The purchase deed is the economic proof that the consumers are satisfied, as they have judged the benefit of the offer themselves, and the organization has received the compensation requested for its efforts.

According to Philip Kotler (Kotler, 2001), the following concepts are global to the marketing: needs, requirements, demand, products, satisfaction, exchange and market. These concepts identify fundamental concepts of marketing. Distinguishing them is also important for marketing practice. Below are definitions for each of them and focus on their most important characteristics in the specific context of their application as marketing concepts in healthcare:

Needs

A person is aware of a deficit of some basic satisfaction. Needs are the deep basis for motivating human behavior. They are basic human requirements arising from human nature - physiological (food, air, water, clothing, heat, safety, etc.); social (closeness, communication, affection, influence, etc.); personal (knowledge, self-expression, self-actualization, etc.). The desire to satisfy a need makes people look for the means to do so.

Health is a basic human need. As a basic human good, it connects three aspects of human well-being: the absence of disease or infirmity (physiological health), mental and social well-being (mental and social health). The physical and mental aspects of health are determined by three groups of factors: endogenous (heredity, biological potential, etc.); exogenous (environmental, social) and etogenic (lifestyle). The demand for health (health improvements) is primary (main goal) compared to the demand for healthcare.

Wants

Need becomes wants if they are pointed to specify objects that can satisfy them. Wants are a specific way of satisfying a need that corresponds to the individual and is inherent in a society. Wants are "unlimited", they develop dynamically with the development of society, under the influence of social factors.

In accordance with this concept, health needs are expressed through the variety of medical products and services offered (research, diagnosis, treatment, consultations, etc.), offered depending on the level of development and organization of the health system (outpatient services, dispensary, hospital and others.). The need for health care (need) most often stems from the need for health. The health need is the way in which the patient solves a health problem: e.g. the control of the blood sugar level can be done either by examination in a medical institution or independently; etc. Health managers do not plan health needs; they plan demand and consumption. Health needs are not created, they are met.

Demand

Demand is the market preference for satisfying a certain need. Demand = need + purchasing power (i.e. opportunity and intention to buy). Demand is expressed in value and is a major object of marketing forecasting and planning. It is important for marketing experts to analyze the demand from

the point of view of the clients: what products and what properties of the products the clients are looking for in relation to the satisfaction of a given need and level of prices / costs.

The demand for health care is intermediate; the main demand is for health. Clients / patients seek and acquire health for consumer purposes (health improvements) and for investment purposes (amount of future working time, for income production and leisure time). The search for health care is not independent, but is dominated by the decisions of doctors and insurance companies and insurers who act as an agent (mediator, trustee) of the patient, in the conditions of the typical health care information asymmetry. The presence of a third party (payer) of the health care consumed by the patient determines the inelasticity of the demand for health services from prices and incomes. The search for health care is characterized by high individuality, insecurity, patient involvement and interest.

Products / Services

A product is any object offered through the market that can satisfy a need in order to attract attention, acquisition, use or consumption. The beneficial effect of an activity or product is a service. The purpose of acquiring material products is the usefulness of their use (services). The products / services are the bearer of any marketing offer (offer), which in addition to them may include individuals, places, organizations, ideas, experiences, assets (property), information.

Health products are considered from the supply side (as a set of services) and from the patient's point of view (as health outcomes). Health services are intangible, heterogeneous, may have different interpretations, are produced with the direct participation of the patient. Physicians acting in the interest of the patient determine who, when and what medical care to receive, seeking to determine the level of care from the patient's point of view, i.e. to determine the necessary treatment for the patient (the type and level of production is determined by the position of needs).

Satisfaction

The satisfaction is an expression of the maximizing consumer's assessment of the value of consumption, which includes the overall ability of the product to meet its needs for each level of costs;

In the search for specific health care, the quality, own experience and status of the disease perceived by the client are especially important factors (Berry, Seltman, 2008).

Exchange / Transactions

Voluntary act of exchange of desired products between two or more parties as a result of which the participating parties may increase the acquired value. The exchange is a process of voluntary agreement between the parties on the terms of the exchange. This requires: at least two participating parties, having something valuable for the other (s), who can communicate freely with each other and free choice. The main way of exchange is transactions, which represent a trade exchange of values, requiring agreed (agreed, guaranteed) terms between the parties for the time and place of the agreement. When the exchange between the parties does not require trade reciprocity and material expression, it is characterized as a transfer. Marketing studies the behavior of all forms of exchange and represents the actions that aim to provoke a behavioral reaction of a specific target audience in relation to the objects of exchange.

The fundamental principle of exchange, according to which the parties involved must have mutual benefit, is maintained as a common ground - doctors seek money and gratitude, patients aim for recovery, but it does not reflect important parameters related to decisions such as those taken. in the operating room and concern life and death. Many medical transactions lack the (simple) exchange

of money and goods typical of other sectors. The general conditions for exchange cannot be met due to special information requirements and difficulties, as well as due to health risks. Nowadays, the majority of exchanges / transactions are made in the presence of a third party, which on the one hand guarantees the exchanges, but on the other hand, makes them more opaque and weakens the influence of resources. Leading are the relationships of trust and professional behavior.

Market

Centralizing social relations. Most often this term describes the set of potential or actual sellers / buyers of similar products / needs. In today's economy, access to products / services is becoming more valuable. For organizations, transactions are not a random and one-time market act, but are the result of building a marketing network that connects it in long-term, stable and mutually beneficial, relationships with its customers, suppliers, intermediaries. Relationship marketing does not aim to increase the value of a deal, but to maximize the relationship.

The health market includes healthcare in the economic system of society. It is a complex network that integrates factor markets (pharmaceutical, medical equipment, labor market), insurance / insurance markets, and health services markets. In many cases, the market is inapplicable to healthcare, and the healthcare model is "a mixture of market and non-market relations". The health system is subject to intervention by: the state (direct provision of healthcare, public health functions, control of infectious diseases, funding of basic research, administrative and economic regulation), professional organizations (self-government of medical professions, clinical activities of medical practices), insurance institutions / insurers (pooling and redistribution of health risks), patient organizations (pooling and stepping up pressure to improve quality and solve problems). Even under pressure, competition is needed. Consumer choice is not based on prices and quantities, but on the quality and uncertainty of health care on health.

The "adjustment" of supply and demand in the considered (economic) context for the exchange makes the required balance fragile, with a very small basis and therefore short-lived.

In the general case - in a market situation - the goal is to turn the needs into active demand (conscious and solvent), which the supply will cover. To achieve this goal, marketing efforts can be influenced through better and more diverse (demand-driven) product and price offerings, providing greater accessibility and achieving better communication with target segments. The distinction between needs and demand is generally a "duty" of consumers themselves, and the role of marketing is limited - it must ensure adequate supply of demand. In the field of healthcare, both the medical system itself and the funding institutions play an active role in transforming the demand needs and its subsequent focus on the "floors" of the healthcare system. The transformation of health needs into concrete demand takes place under the baton of supply (doctors, insurance companies) and this situation of asymmetry is a key feature of the health services market. No less and no less important is the importance of financial mechanisms that aim to direct public resources so as to best cover health needs. Depending on the financial incentives (and under conditions of limited public health resources), there may be a difference between financial flows, health needs and demand. The combinations between health needs, supply and demand, direct the attention of health managers to the search for options for effective marketing balance in the process of providing value. This requires an accurate calculation of the health needs for each of the segments in which the medical institution operates and the determination of such a level of supply that would cover the rational demand. The mismatch between health needs, supply and demand outlines fault zones that draw the map of financial deficits or irrational spending of healthcare funds. Accurate

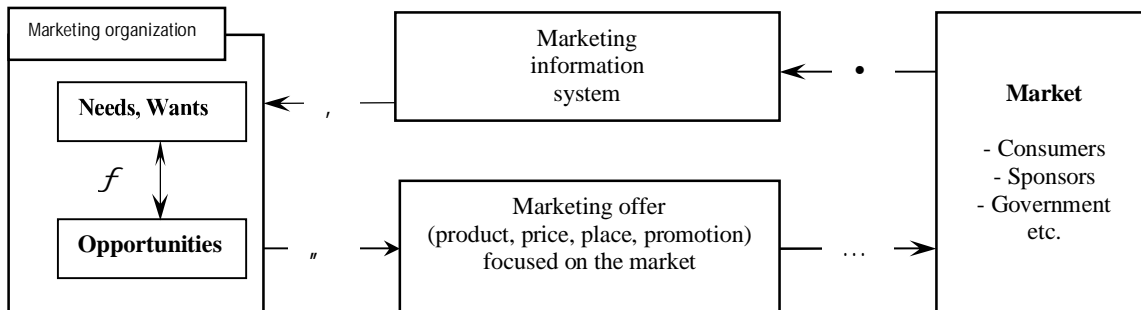
forecasting of demand on the basis of a detailed map of the health needs of the population is the key prerequisite for effective management of the health system.

THE MARKETING PROCESSES

(a). The customer is always right!

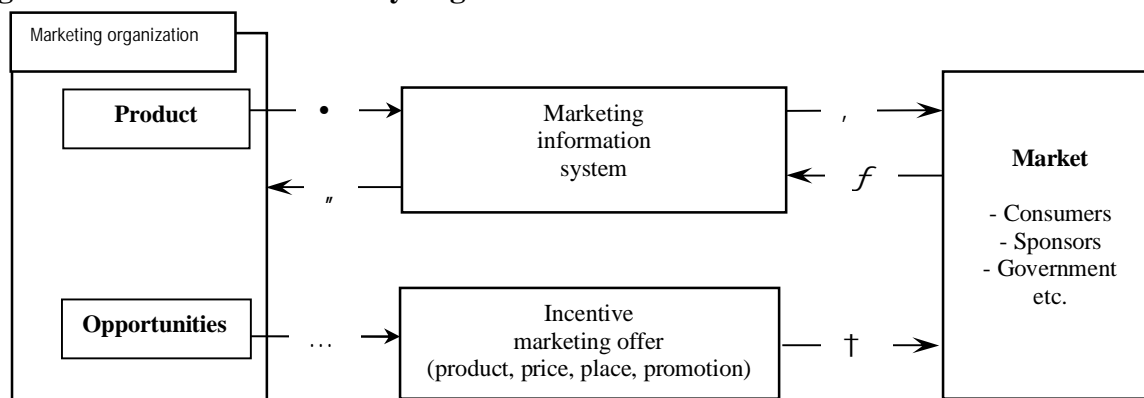
The distinction between the basic concepts - health needs, supply and demand, shows the logic of (management) of the marketing process. The sequence is as follows (Figure 2): using data from 1) the marketing information system, 2) the organization assesses the needs and the ability to meet them, taking into account 3) the resources at its disposal and 4) its mission, then it uses the available and possible in this case 5) tools (marketing complex) to influence consumers. In this logic, accepted as universal, customers are the starting and ending point - the movement is: market ® information system ® organization ® market.

Figure 2. The client is always right



(b). The customer is not always right!

When the object of marketing are products whose benefits consumers cannot appreciate because they do not have enough information and knowledge about it, or which they do not want to receive, as this is associated with discomfort and / or efforts that they do not want to make, the organization can apply another approach - not from the customer to the product (organization), but vice versa - from the organization to the customer. The marketing sequence is modified as follows (Figure 3) - marketing begins within the organization, the aim is to determine what part of the market may be interested in the already created product, and once consumers are identified, through marketing tools is constructed (additional, stimulating consumption) marketing offer. This logic is typical for the products of creative activities, for social marketing, for a number of professional services, whose products cannot be directly derived from the existing needs in health promotion and a number of activities under the auspices of public health.

Figure 3. The client is not always right

Regardless of the starting point, the traditional understanding of the marketing process seems like a closed route - its starting point and end point coincide. Moreover, since the ideal situation in the desires of managers is when supply and demand coincide, it can be said that the aim is for this movement to be on the shortest section of this closed route. Focusing on the customer is the rational core that defines the place of marketing as a function of management, but when in the marketing process it is carried out without taking into account that customers and the organization are part of a larger social system, it can also turn out to be a disadvantage.

TOOLS AND MANAGEMENT

The traditional understanding of marketing is instrumental. It is assumed that marketing summarizes all organizational activities for the management of market demand (Kotler, 2001; Kotler, Clarke, 1987; Hillestad, Berkowitz, 2018). Based on information about the needs and requirements of their customers, managers decide what products to offer them (design, product offering and after sales service); at what price and what is the economic benefit from their production (pricing); how to deliver the products and how to procure the necessary factors for their production (supply management from raw material markets); how to be informed and encouraged customers to look for the products (communications) addressed to them (Kotler, Lee, 2007).

The construction of 4Ps marketing-mix is a leading theoretical framework for the design and management of marketing tools used in healthcare organizations (Kotler, Clarke, 1987; Berkowitz, 2010; Smith, et.al, 2002; Thomas, 2020, Gladilov, et.all, 2015; Kostadinova, T., M. Rohova, 2016). Of course, not all components of this toolkit "feel" comfortable in a highly regulated health environment (Getzen, 2004) - e.g. a number of healthcare providers have limited opportunities to use prices as a tool - this is due to direct price regulations or the presence of a third party in the payment and the resulting low price elasticity of demand. Advertising in healthcare and especially in pharmaceutical products is subject to strict requirements and restrictions. As participants in the national health system, hospitals may be limited in their ability to provide a range of products or change their location according to demand. The products have the strongest influence on the specific combination of the ingredients of the marketing mix.

Product

In healthcare, these are goods, ideas, services offered by the healthcare organization. Unlike other industries, the product in healthcare is not always easy to define as an object of marketing. Most of the healthcare organizations offer intangible products, healthcare / services, the description

of which is not always clear and allows them to use marketing concepts directly (Getzen, 2004). Drastically changing health environments and the development of health care systems are also having an impact. To the traditional products such as medical procedure, orthopaedic joint, consultation with a specialist, nowadays prepaid health insurances and insurances are widespread, which provide different level of access and coverage of healthcare, group sold / purchased products and services. Health insurance is seen as a product that provides security and protection from financial difficulties in the event of illness. Product diversity is also a complicating factor - some hospitals, for example, offer a wide range of products / services. Some of the products promoted by health organizations are ideas: the image / reputation and the organizational brand / brand are transmitted through all activities performed by the health organization (Berry, Seltman, 2008). Healthcare marketing must combine an industrial approach and a service-specific approach, as marketing offers can be both tangible products and services (Wooldridge, Camp, 2018). Unlike the former, which are usually provided in a non-personalized environment as a single episode, health services (e.g. examinations) are a continuous process, variable, non-permanent, more personal, inseparable from the doctor. Product design, perceived product attributes, convenience is becoming increasingly important.

Price

The concept of cost in healthcare is broader than the amount of cash costs that it reflects as costs to the buyer. The asking price for the product / service includes various elements such as - fees, fees, bonus payments, etc. The price must reflect the time, which is an indispensable resource for both patients and the service organization (during the service, access to another is impossible). From this point of view, additional monetary costs (related to access) and non-financial costs (physical and psychological efforts such as pain, discomfort, shame, anxiety, dissatisfaction, etc.) must be added to the consumer's price requested by the supplier.

Place

This tool addresses all factors that facilitate a transaction, service or relationship. The activities of the marketers are various - conditions for booking an appointment for an examination, receiving the results of research on the Internet, or preventive examinations by fund provided on site, etc. Increasingly, patients are dictating delivery terms. In addition to procedural issues, delivery depends on a number of issues related to the main activity / value: site maintenance, parking fees, scheduling systems, access to information and databases, and more. The methods of delivery affect the convenience for the customers, and the access increasingly determines the quality perceived by the customer.

Promotion

Covers all forms of marketing communication, whereby customers learn that the organization has a ready response to their needs.

The concept of the marketing complex is the basis for long-term decisions. In its original versions, the model envisages that marketing decisions take into account four clearly defined "market" forces: consumer behaviour, the behaviour of suppliers and competitors, and the regulatory behaviour of the state (in relation to marketing control) (Borden, 1964). Further, in the model of 4Ps marketing-mix of E. J. McCarthy, marketing is "closed" in a marketing environment that has the following 5 key aspects: socio-cultural environment, competitive environment, economic and technological environment, political and legislative environment, goals and resources of companies. Marketing is the function that has the task of studying and providing up-to-date

information about the development of the environment, after which it gives "instructions" for the development and the efforts that the whole business must take! Without marketing information, forecasts and secured demand, through real business contacts, financiers will draw up budgets and cash flow plans in white, operations managers will not be able to synchronize production and plan the necessary product and technological changes. The environment in which marketing operates directly affects strategic management and strategic planning processes. In fact, any strategic management must be marketing-oriented.

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АРХИТЕКТОНИКА НА ЗДРАВНИЯ МАРКЕТИНГ

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Резюме

В пазарна среда маркетингът предоставя универсално знание и структурира ефективен управленски подход за преодоляване на противоречията между търсене и предлагане. Различия, които в здравеопазването могат да бъдат много по-силни и чувствителни. Прилаган на различни равнища здравният маркетинг е натоварен със свръхочаквания: да е част от решението на фундаментални за здравната система проблеми, каквито са адекватността, достъпността и качеството на здравната помощ, ефективността на ресурсите и на дейностите, създаването на култура на обслужване фокусирана върху нуждите на пациента, „еманципирането“ на здравния пазар от преследването на егоистични интереси, стимулиране на технологичния напредък, издигане на обществения престиж и удовлетвореността на работещите в системата. Ролята на маркетинга става централна в управлението на здравните организации. На този фон статията теоретизира водещи маркетингови концепции, като прави опит да изгради обща аналитична и организационно-управленска рамка на маркетинга в здравеопазването. В архитектурата на здравния маркетинг намират място различни елементи – концепцията за обмен играе ролята на „философския камък“, на чиято основа се надграждат ключовите елементи на маркетинга – нуждите, потребностите, търсенето, продуктите, удовлетворението, пазара – които инструментите на маркетинга задвижват в логиката на маркетинговия процес. Статията дискутира редица въпроси, чиито теоретични обобщения насочват и към практически отговори: как да съчетаем придобитата стойност за клиента и добавената стойност за организациите; как да дефинираме ключови маркетингови понятия и управленски инструменти в специфичния контекст на здравеопазването и др.

Ключови думи: маркетинг, здравен маркетинг, маркетингов обмен, нужди, потребности, търсене, здравен пазар, здравни услуги, маркетингов процес, търсене на здравна помощ.

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