

The Opportunity for e-Philanthropy in Hospital Development

whitepaper

Introduction

Used strategically as part of a broader fundraising and marketing plan, the Internet can be a vital communications channel through which hospitals and their associated foundations can cultivate relationships with current and prospective donors. Over time, some portion of new donors acquired through the online channel will become major and planned givers.

Consider this: As of September 2005, 75 percent of adult men and 69 percent of adult women in the United States were using the Internet regularly.¹ Yet, many hospitals have only just begun to scratch the surface of the Internet's potential for communicating with and engaging constituents to drive fundraising. In recent years, many organizations in other segments of the nonprofit sector have been embracing the Internet and now have thriving online programs delivering strong results. In some cases, these nonprofits now rely on the Internet as their *primary* means of fundraising while, on average, a typical large U.S. hospital raises only a fraction of 1 percent of its funds online.²

This paper explores the opportunity for hospitals to use the Internet channel to work hand-in hand with and enhance other fundraising and donor cultivation activities.

Key Trends Impacting Hospital Fundraising

Hospitals increasingly need more funds

Hospitals need to raise more money than ever before. Among other reasons for this, liability costs are rising, hospitals increasingly must treat the uninsured, corporations are tightening their philanthropic belts, government and foundation grants are harder to obtain, and costs for medical treatments are rising.

Meanwhile, increases in donations to healthcare institutions are barely outpacing inflation. In 2004, donations to U.S. hospitals rose only 3.5 percent, while inflation rose 3.3 percent.³

The competition is heating up

The competition from other healthcare facilities and nonprofit organizations for a slice of the "philanthropy pie" is mounting. Hospitals now advertise for new patients at unprecedented levels. The goal of these campaigns is to make certain hospitals "top of mind" for consumers with specific medical conditions or those seeking specific treatments. Ironically, many hospitals within a system spend large amounts on advertising only to end up competing with other hospitals in the same system, which clearly is not an efficient use of limited budgets.

Departments within a hospital may even compete for fundraising dollars. Many patients are treated by more than one department, each of which will later seek support from the patients it treated.

¹ Pew Internet & American Life Project, September 2005 Tracking Survey.

² Convio estimate.

³ Association for Healthcare Philanthropy, "USA/Canada Association for Healthcare Philanthropy Report on Giving FY 2004."

Hospitals also face increasing competition for fundraising dollars with nonprofit organizations outside of the healthcare world. There is a finite number of philanthropists and charitable dollars available — and *every* nonprofit is becoming more skilled at appealing for those funds.

Online giving has become more popular

More people today are online and conducting more business, including personal transactions such as making donations, over the Internet. Additionally, major disasters in recent years have accelerated online giving and seem to have primed Americans to donate online. Of the more than \$1 billion that American Red Cross (ARC) raised after 9/11, only 3 percent was raised online. Four years later, of the \$1.67 billion ARC received following Hurricane Katrina, 24 percent was raised online. And in 2005, ARC raised 51 percent of its funds for victims of the South Asian earthquake through the online channel.

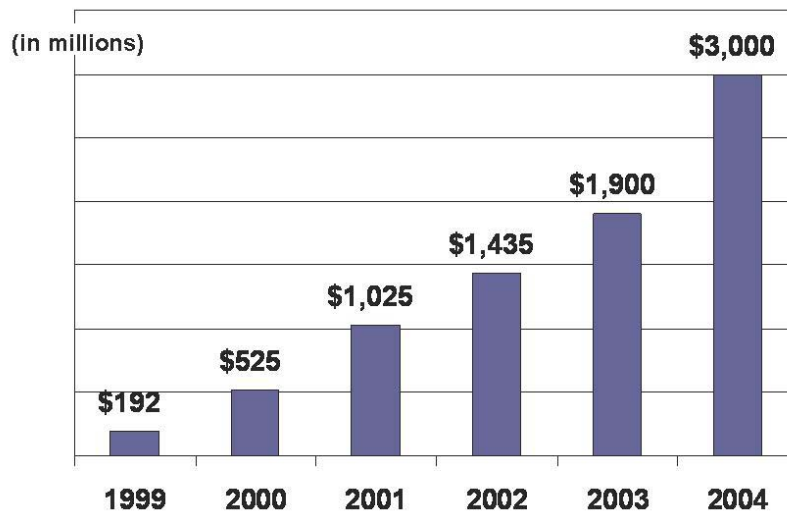


Figure 1. Total raised online by nonprofits (estimate)
Source: *Wired Magazine*, 2/06

Nonprofits with a global “brand name” like American Red Cross are not the only organizations that have experienced a significant upswing in online fundraising following a disaster. For example, the American Humane Association raised *20 times* more online in the weeks following Hurricane Katrina than it raised in all of 2004, through all channels. The American Society for the Prevention of Cruelty to Animals (ASPCA) raised more than \$6 million online in three weeks, compared with the \$1.2 million it raised in all of 2004.

Beyond these anecdotal examples, aggregate data shows that in just a few years, U.S. online giving has more than doubled. As of October 2001, 11 million Americans had donated to a nonprofit organization online, but by January 2005, 26 million — about 18 percent of all U.S. Internet users — had made an online donation.⁴

⁴ Pew Internet & American Life Project Data Memo, November 2005.

The Internet has become a trusted source for health information

Americans increasingly use the Internet to find information about medical conditions, treatments, doctors and hospitals. The lack of a strong presence on the Internet is a strategic disadvantage to a hospital.

According to a January 2006 report by the Pew Internet & American Life Project, 17 million people said the Internet had played a crucial or important role in helping another person with a major illness or medical condition, and 7 million said the Internet had played a crucial or important role in dealing with their own major illness or health condition.

In addition, Pew's May 2005 Health Information Online report noted that 79 percent of adult Internet users — roughly half of the U.S. adult population — searched the Internet for at least one of 16 health topics. Overall, 28 percent of Internet users searched for information on a particular doctor or hospital, up from 21 percent in 2002. The report also noted that 66 percent searched for information on a specific disease or medical condition, and 51 percent searched for information on specific medical treatments or procedures.

The Importance of the Internet for Hospital Development

The trends and data described above make clear that the Internet is now a viable and critical mainstream channel for reaching and cultivating donors. More importantly, the precise demographics that hospital fundraisers want to target are active online *en masse*. In this regard, the Internet is more lucrative than traditional channels such as direct mail, telemarketing and community-based events. Three groups, in particular, are strong targets for online communications and appeals.

The affluent

More than any other demographic characteristic, Internet use correlates most strongly with household income, and income naturally correlates strongly with both propensity to give and average donation amounts.

Household annual income	Percent who use the Internet
Less than \$30,000	54%
\$30,000-\$49,999	78%
\$50,000-\$74,999	87%
\$75,000 +	94%

Figure 2. Internet penetration by income level

Source: Pew Internet & American Life Project, September 2005 Tracking Survey

Senior citizens

Seniors are a critical demographic for hospitals, for two reasons: older individuals tend to have more health problems, so they have stronger affinity for healthcare organizations; and, seniors are more

interested and involved in planned giving because they are more likely to have accumulated wealth over their lifetimes. But why reach them through the Internet?

Internet use among seniors is now widespread, as Figure 3 shows. About two-thirds of seniors ages 50 to 64 use the Internet, and the percentage of those 65 or older who are online is significant. More important is the rapid growth rate. In the last seven years, depending on the age range, these figures have increased between two to six times. And as younger, already Internet-savvy generations age into their senior years, these figures will continue to rise.

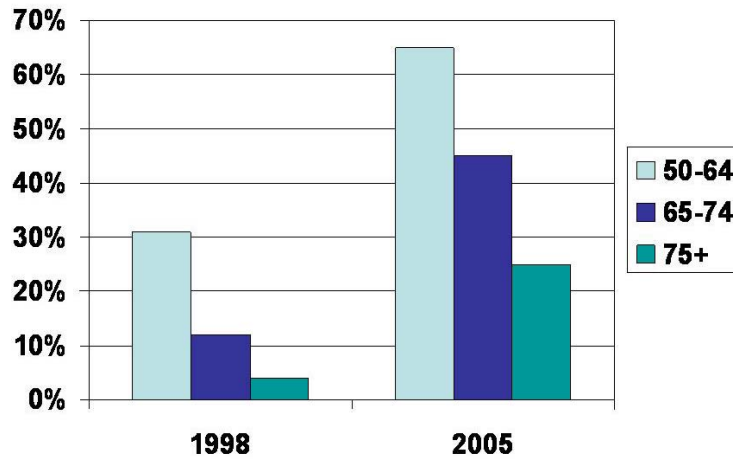


Figure 3. Percentage of U.S. population who use the Internet, by age group
Source: AARP, *The State of 50+ America 2006*

Seniors' use of the Internet to research medical issues also is growing quickly. In 2004, 66 percent of seniors 65+ used the Internet to obtain health and medical information, compared with 53 percent in 2000.⁵

Younger generations

Younger "20 and 30 something" donors are the major and planned givers of tomorrow. But younger "GenX" and older "GenY" donors are generally healthy and have little to no affinity for healthcare philanthropy. Even if they were more interested, they are difficult for hospital development organizations to reach through traditional marketing channels. This generation typically does not read direct mail or attend events, and increasingly only has a cell phone versus a land line, making them poor targets for telemarketing campaigns.

Moreover, this generation *prefers* to use the Internet for researching information (through search engines), keeping informed (via email), and taking action (such as making a donation). If they want to donate, they generally want to do it online, not by mailing a check. If they do want to receive communications, they want it via email, not direct mail. If they want to register for an event, they want to do it on a Web page, not by making a telephone call or mailing in a form. Keep in mind that

⁵ Pew Health Information Online report, May 2005.

GenY is the first generation to grow up in an Internet world. Not offering these options makes it more difficult and less desirable for this constituency to support a hospital.

Politics provides a telling example of the younger generations' preference for the online channel: in 2004 more than 80 percent of the contributions to political candidates by people ages 18 to 34 were made online, according to a study by George Washington University.⁶

The Donor Pyramid and the Internet

It is important to view implementation of an online fundraising program as a long-term investment. In the short-run, most hospitals will raise a modest amount online since building a donor email file – key for online fundraising – takes time. In the mid-term, an online fundraising program may start to become a significant source of individual gifts and new donor acquisition. The more lucrative long-term payoff, however, is that some portion of new donors acquired through the online channel *will* eventually become major and planned givers. In the meantime, these donors are very valuable as a hospital stewards relationships and moves them up the donor pyramid. They will typically give more and give more often than donors with whom the relationship is built entirely on direct mail and ticketed events.



Figure 4. Donor pyramid

The key to moving donors up the pyramid is online Constituent Relationship Management, or eCRM. eCRM is a methodology that helps fundraisers attract, motivate and retain the constituents who support a hospital, convert them to donors and then increase their support. In this context, "constituent" includes current, former and prospective donors, volunteers, patients and their family members, medical staff, and Board members. Even without software tools to support it, eCRM is a useful framework for thinking about an online strategy.

⁶ The Institute for Politics, Democracy & the Internet, *Small Donors and Online Giving: A Study of Donors to the 2004 Presidential Campaigns*.

eCRM has four phases:

1. **Reach new donors** — Reach out to new and existing donors using the Web and email.
2. **Build relationships** — Gather information about what interests and motivates donors, and use that information to communicate regularly with donors in a personalized manner.
3. **Drive action** — Issue “calls to action” based on each constituent’s interests, such as making a donation or registering for an event.
4. **Develop loyalty** — Build ongoing loyalty by communicating regularly with donors based on their interests and history with your hospital.

eCRM is a cycle. Loyal donors (phase 4) evangelize the mission of the hospital they support, which in turn leads to new donor acquisition (phase 1), causing the cycle to repeat. Relationship-building (phase 2) is an ongoing objective. The more donors interact online with a hospital they support, the more the hospital can learn about them and communicate with them to inspire more frequent and larger donations as well as renewals.

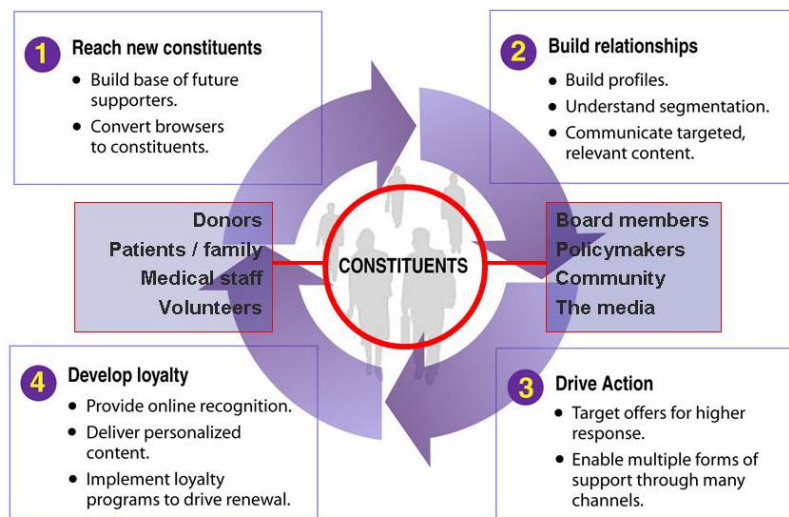


Figure 5. The eCRM cycle

By better understanding the specific interests of donors at the individual giving level, a hospital can better tailor messages that, over time, will strengthen their loyalty, encourage larger donations leading to a major giving level and ultimately to make the hospital a part of their planned giving strategy.

eCRM and the online channel generally are an efficient way to reach the masses of individual givers. Using the “higher tech” automated reach of Internet software, you can reach more donors at a lower cost, freeing development staff to focus on cultivating major donors and planned giving opportunities, which requires a “higher touch” approach to donor stewardship.

By applying the principles of eCRM, the online channel can directly feed major giving programs, as well – and sometimes faster than one might expect. Consider the experience of the American Red Cross Mile High Chapter in Denver. As a result of its Hurricane Katrina appeals in September and October 2005, the chapter raised \$1.5 million online. 212 new contributors each gave online gifts of \$1,000 or more. The organization targeted this constituency with a series of cultivation emails to keep these donors apprised of how their contributions were being spent. The chapter also sent emails and

hand-written invitations encouraging these donors to participate in fundraising events. Six of these major prospects participated in events; four took personal tours of the chapter. In this case, online fundraising and eCRM sourced more than 200 strong prospects for major gifts and enabled the organization to identify six previously unknown prospects for major gifts.

The Online Channel versus Direct Mail

Direct mail is the primary channel hospitals use for outreach in annual giving campaigns. Even with a substantial email file and email marketing tools, direct mail is a viable and still important outreach channel that should continue to be a part of a hospital's communications and fundraising mix. The best strategy is to harness the direct mail and online channels *together* to maximize fundraising appeal response.

People respond differently to different media. It is important to acknowledge that some people *prefer* to interact with organizations online, and this preference should be accommodated. Likewise, some people prefer offline interaction, for several reasons; many people still do not use the Internet regularly, some want to minimize email inbox "clutter," some are not comfortable making a donation online, and some people like the tangible nature of a letter or postcard. These donors and prospects need to be accommodated accordingly, as well. The online channel is a supplement, not a replacement, for direct mail.

Even so, a hospital is best served by moving as many people as possible to the online channel, primarily because direct mail is generally ineffective from a cost/benefit standpoint. Typical response rates of less than 1 percent (and falling over time) are increasingly difficult to justify given the rising costs of direct mail production and postage.

There are several other unique advantages to the online channel versus direct mail:

Immediacy

From conception to delivery, direct mail campaigns require months of work. By the time a campaign is ready to drop, the hospital's needs may have changed. Also, because of the time delay, a hospital cannot incorporate breaking developments and news into mailings and thus loses the opportunity to capitalize on timeliness. The "window" to create urgency that can drive fundraising in the wake of a current event often is brief. In these cases, there is no time or budget to write, design, print and send a direct mail piece. The immediacy of email communications allows a hospital to execute fundraising campaigns and respond to timely issues in a matter of hours.

The Internet also facilitates immediate communication and action. Email appeals can be delivered in hours, and typically return 80 percent of total responses within 48 hours of a mailing. In contrast, direct mail appeals have a response lag time of several weeks, or even months. The speed of email allows near real-time evaluation of a campaign's results and quick adjustment of strategy, if needed. In addition, providing donors with the option to give online allows a hospital to receive the funds immediately and automatically, versus waiting on the mail for a check that requires manual processing – another delay and a drain on administrative manpower.

Communication without solicitation

Since most hospitals can only afford to send a small number of direct mail pieces each year, it is critical that each campaign maximize return on investment by aggressively soliciting a donation within each communication. Unfortunately, this approach can be a turn-off for many potential donors who may feel that the hospital only is interested in their money.

Nonprofit organizations that have embraced the Internet appreciate the value of true online stewardship — sharing information about the organization's work as well as learning more about donors' interests, but not making every interaction a solicitation. Over time, this is a more effective way to raise funds because it focuses on relationship-building, the cornerstone of eCRM.

Ability for mass personalization

The high production costs of direct mail pieces preclude the development of multiple, highly personalized variants. In most cases, every direct mail piece looks the same and delivers the same message. Non-personalized communications, in any form, generate lower response rates.

Personalization can take many forms. At its simplest level, it can mean addressing an email to "Chris" instead of "Dear Supporter." Or, it can mean including phrases that acknowledge a donor's previous involvement with your hospital, such as "Thank you for your last donation of \$250."

At a more advanced level, personalization can mean replacing the content of an email newsletter or Web page with content specifically relevant to the recipient, based on preferences he or she indicated earlier, on demographics, or on other factors. For example, a section of a hospital's newsletter may be devoted to breakthrough treatments now available at the facility. A recipient who has given to a cancer research fund in the past may see content about breakthrough treatments for cancer, whereas as a recipient who has given to a capital campaign may instead see more content about the treatments offered in a new hospital wing she helped finance.

The Internet enables an unlimited number of tailored versions of both Web site and email content. By creating one "baseline" version of, for example, an email newsletter, and making certain pieces of copy or images personalized to the recipient, an organization can achieve much higher open and response rates.

Ability to test campaign effectiveness cost-effectively

More sophisticated online tools also allow you to test hypotheses about ways to improve the effectiveness of proposed campaigns, at no incremental cost. Using an approach called an A/B test, one can vary a single element of a campaign and see which of two campaigns yields a better result by sending both campaigns to a subset of an email address file. Perhaps one subject line of an email ask will get more people to open it than another, or perhaps including one graphic will yield better results over another. Conducting such tests using direct mail may be prohibitively expensive, and test results will take longer to obtain.

The American Society for the Prevention of Cruelty of Animals (ASPCA) used such a test as part of a mass personalization strategy. The organization sent fundraising solicitations via email that included images of puppies to members who indicated through an online survey that they owned a dog and, as a control group, also sent emails without puppies to compare effectiveness. Dog owners who received

puppies were 26 percent more likely to open the email and twice as likely to click a link in the email to make a donation versus the control group.

Ability to track and report on campaign results in real time

One of the key differentiators between direct mail and the Internet is the ability to track results immediately and gain direct insights into donor behavior and giving trends. Using the Internet, an organization can get up-to-the-minute reports of donation and other online activity.

In contrast, direct mail provides no immediate progress or feedback mechanisms. Did the recipient see the letter, open it, or read it? Did he or she make a financial contribution as a result of the campaign, or was it for another reason? Sophisticated online tools can track such information — how many emails were delivered, who opened the email, who clicked a link in the email, who made a donation after reading the email and much more.

The key value in online tracking capabilities is the insight this information provides about the effectiveness of a hospital's fundraising campaigns — what worked as well as what didn't.

Learning more about your constituents

A unique aspect of the online channel is the ability to collect information about constituents in real-time. This information can be used to build rich profiles about what is important to them, and then utilize that information to improve development efforts by tailoring communications to each individual's interests.

An organization can collect information about constituents overtly or passively. Web-based surveys and forms allow an online user to overtly declare his or her interests. Link tracking (recording what links within email messages or on a Web page constituents click), site usage history (recording what Web pages on a site were visited, how many times, etc.) and other historical online interaction activity (e.g., whether constituents previously donated or registered for an event online) also can provide valuable insights without the user explicitly providing any information.

Based on this information, a hospital can segment the types of users it targets for various solicitations or general communications, and tailor appeals to each segment accordingly. This ensures that each communication is relevant and valuable to each constituent, and more likely to inspire him or her to respond.

Innovative Online Programs That Direct Mail Cannot Offer

In an ideal world, a hospital's strongest supporters would work on the organization's behalf to recruit constituents and solicit donations, thus enabling your limited staff resources to focus more on advancing your mission. But, traditional marketing methods do not provide a simple way to accomplish this. Sharing direct mail pieces with friends and family members, for instance, is a clumsy, manually-intensive process. Today's advanced Internet marketing and fundraising tools provide capabilities that direct mail lacks, making this process faster and vastly more efficient.

Tribute-based fundraising

Consider honorary and memorial gifts. The best champions for a hospital are those that received exceptional care at the facility, or close friends and family members of well-served patients. Given easy to use online tools, these individuals can quickly create fundraising-focused Web pages that explain their experience and enthusiasm for the hospital; then, they can email friends and relatives to drive them to their Web pages and encourage donations. Those new donors could, in turn, invite additional people in their networks to donate, as well. Donations can be processed online, without requiring involvement by your staff.

Team-based fundraising

These tools employ a concept called “viral marketing” to get your constituents to spread the word about your organization to their friends and family members using automated email tools, and encourage those contacts to take a specific action that benefits your organization. Team-based events are a common application of this concept.

Case study in team-based fundraising

In 2005, the international event fundraising consultancy CauseForce used Convio’s team-based fundraising tool – TeamRaiser™ – to raise more than:

- \$38 million CDN (about \$32 million U.S. dollars) for four “Weekend to End Breast Cancer” walk events in Canada.
- 5 million Pounds (almost \$9 million U.S. dollars) for the “Breakthrough Breast Cancer” walk event in London.
- \$40 million (U.S.) for five breast cancer walk events in the United Kingdom and Canada.

Take the example of a hospital that holds an annual fundraising race to support research in a particular medical area. Using online tools, each race participant can create a personalized fundraising Web page that includes his or her personal fundraising goals; upload a list of email addresses of friends and family members who may be supporters; and then send an email to those people to drive them to the Web page where they can easily pledge support for the race participant online.

Virtual ecommerce

Although most people think of ecommerce as selling physical goods online, it also can refer to selling “virtual,” or intangible, goods and services. For example a hospital running a capital campaign to build a new hospital wing could sell bricks for \$2 each. The buyer is of course not *actually* buying a brick, but the benefit of this type of fundraising is that the buyer gains a sense of how his or her donation may be spent.⁷ People are generally more inclined to donate to something specific than a general fund, and may in fact donate more when offered this type of opportunity.

A secondary benefit to this approach is that assigning costs to specific goods helps prospective donors understand the real costs a hospital must cover. Seeing a realistic price tag on an incubator for a neonatal intensive care unit (NICU) may push donors over the hump of resistance to give, and to give generously.

Virtual ecommerce also helps build a sense of ownership in a hospital and strengthens loyalty. When a donor sees a completed hospital wing or has a baby treated in the NICU, he or she will feel a direct connection between his or her donation and the value it provided.

⁷ As a best practice, it should be disclosed on online donation pages that the earmarking of funds for these virtual products is representative only, and that donations are unrestricted and may in fact be used for other purposes.

Virtual ecommerce has longer-term benefits, as well. It affords a powerful insight into what is important to the donor base. For example, for its next capital campaign, a hospital may want to flag donors who bought a brick in its previous capital campaign, or approach those who helped build the NICU for community events with a focus on children.

Five Steps to Planning for Success and Starting an Online Program

1. View the launch of an online program as a long-term investment, not a cost.

Success on the Internet requires the initiation of a *program*, not just the purchase of a set of technology tools. Programs — which require a balance of tools, people, processes, funding, and time — require a long-term investment to generate a meaningful return. A hospital should be prepared to dedicate staff members (or to contract with outsourced administrators) and budget to implementing and managing online programs.

2. Define success appropriately.

Set realistic goals and metrics. The primary purpose of an online program should *not* simply be “to collect millions in online donations.” Rather, view the Internet as a donor cultivation “platform” that will allow the hospital, at a minimum, to:

- (a) Engage new donors that the organization otherwise would not have reached — especially younger donors, out-of-area donors, friends and family members of new and existing donors, and anyone who is less receptive to marketing via traditional channels.
- (b) Use the principles of eCRM to raise more per donor, achieve higher renewal rates, and drive “low level” individual supporters up the donor pyramid, eventually transforming some of them into major and planned givers.
- (c) Reduce the costs of annual fund fundraising by moving some manually-intensive activities — such as donation processing, event registration and direct mail fulfillment — to the Internet.

View the Internet as a supplementary channel — not a replacement — for every fundraising activity in which the hospital is engaged. The Internet channel will exist in parallel to some programs and as a direct complement to others. Some things will not change, of course. For instance, major givers and corporate and foundation grants will continue to provide 30-50 percent of a hospital’s funds and should continue to be cultivated in person with a “high touch” approach, and individual givers should still be able to donate by check.

3. Get other departments on board early.

A successful online program requires active teamwork between a hospital’s development, marketing and sometimes its IT (information technology) groups. For many hospitals, interest in e-philanthropy originates in the development office, but because marketing typically owns the public-facing Web site this function must be involved, too. IT groups may manage or administer the Web site or donor database, in which case their involvement also is required. When formulating an Internet strategy or evaluating technology vendors, involve these stakeholders from an early stage.

Acknowledge that a cultural change is required for success. Because organizations have some degree of inertia, there is a tendency to stick with how things have always been done versus taking a risk to potentially achieve stronger results. Many hospitals are content with the progress they are making without embracing the Internet. Although implementing an online program can be temporarily disruptive, once over some initial hurdles, the results can be vastly superior.

4. Start building an email file

One of the first questions hospital development professionals ask is, “How do we get started online? We only have a few hundred email addresses, but tens of thousands of mailing addresses.”

Key to building an email file is gathering email addresses through every interaction with current and prospective donors. Email address collection needs to become part of all fundraising initiatives. Planned interactions such as new patient registration, first-time and renewal appeals, and event invitations and registrations are perfect times to ask for email addresses. Add a field for email collection to all response forms. At events involving interaction with a large number of constituents, consider setting out a newsletter sign-up sheet, or stage a giveaway for attendees who drop a card with their name and email address.

When asking for email addresses offline, emphasize the benefits for constituents. Remind supporters that by communicating with them online, the organization can save money and administrative manpower – precious resources that can be reallocated to activities that more directly support mission fulfillment. Also emphasize the benefits of timely communication — with email communications, the hospital is better equipped to respond to compelling events and inform constituents quickly of important news, developments, events and programs. Donors who prefer email communications will not need much persuasion.

For more on email file building

Download Convio’s Email Marketing Guide for best practices regarding list building and more. Visit www.Convio.com/Hospitals

Let people know how their email address will be used. Develop a concise policy and display it wherever email addresses are requested. People especially need to know whether a hospital will ever rent or sell email addresses to a third party. Read the privacy policies posted on popular commercial Web sites to get some good ideas on today’s best practices.

If a hospital has an extensive donor database but few current email addresses, it should consider using an email appending service to quickly reconnect with supporters via email. These services add a constituent’s email address to that constituent’s existing record in the hospital’s database. The email address is obtained by matching those records from your organization’s database against a third-party database to produce a corresponding email address. Keep in mind, however, that match-rates vary, and while appending solves the problem of matching email addresses up to current supporters, it is not a substitute for a long-term strategy to build and maintain an email file.

5. Invest in online strategy consulting

Success online requires careful planning to determine objectives, priorities, coordination among organizational functions, timelines, key steps, and success metrics. Online marketing is a relatively new function for most hospitals and rarely a core competency of hospital development or marketing staff. And since no two hospitals are identical, a cookie-cutter online plan is not a viable option.

Organizations that invest in an online strategy consulting engagement before deploying technology solutions have greater success, however an organization defines it. Strategy engagements can last from a few weeks to a few months, or consultants may be engaged on a long-term retainer for ongoing guidance before, during and after technology deployment.

Summary

E-philanthropy offers tremendous potential for hospital development. Using the Internet, a hospital can reach donors that it would not otherwise reach, significantly lift average donation amounts and renewal rates, learn more about donors using the principles of eCRM, and run more effective campaigns based on real-time data and feedback — and do all of this cost-effectively.

About Convio

Convio is the leading provider of on-demand software and services to help nonprofits use the Internet strategically to build strong relationships with constituents for driving fundraising and other forms of support.

Convio has more than 550 clients in every segment of the nonprofit sector. Hospital and foundation clients includes Hackensack University Medical Center Foundation, Children's Hospital Foundation (D.C.), Montefiore Medical Center, Roswell Park Cancer Institute, Stamford Health Foundation, John Wayne Cancer Foundation, and Abington Memorial Hospital.

Convio also works with some of the largest healthcare-related organizations in the world, among them, American Red Cross, The National Multiple Sclerosis Society, American Diabetes Association, Ronald McDonald House Charities, The ALS Association, The Susan G. Komen Breast Cancer Foundation, and AVON Foundation.

Since the company was founded in 1999, Convio has helped nonprofit organizations raise more than \$350 million online.



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