



JUNE 2026

MONTHLY

CONTENT CALENDAR

by Hazel Piper Creative

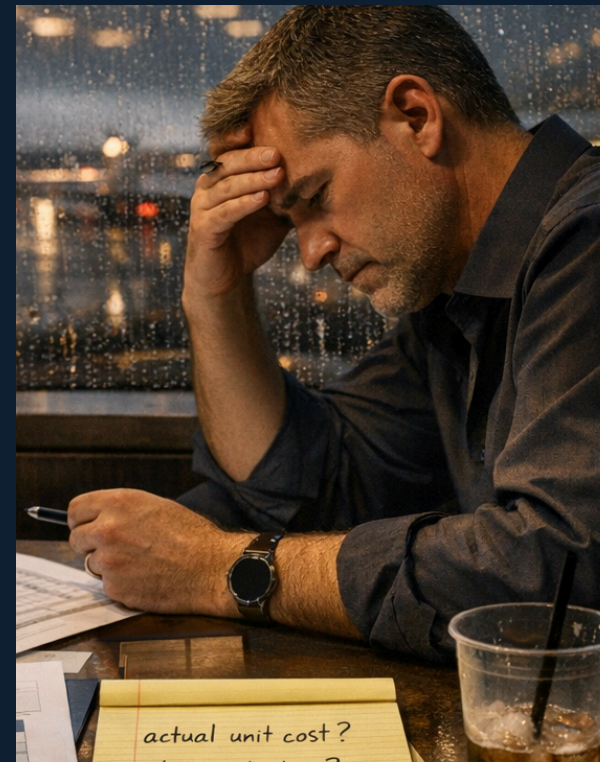
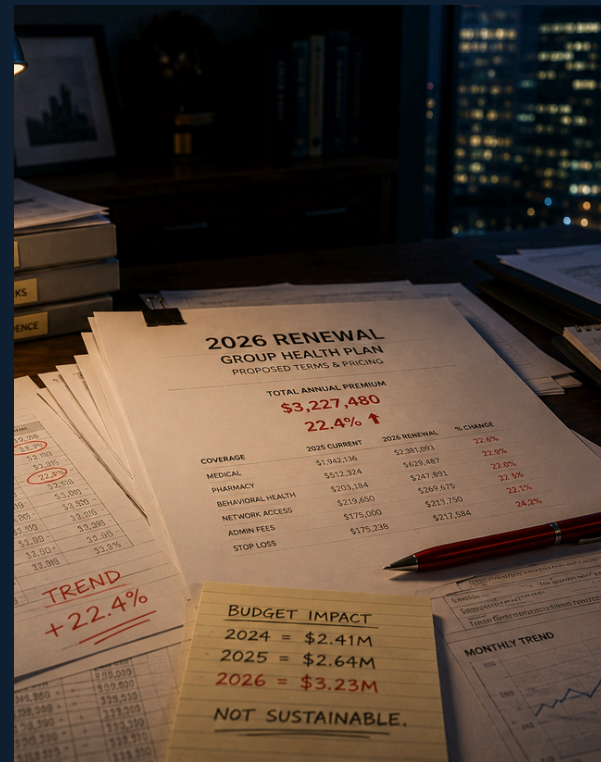
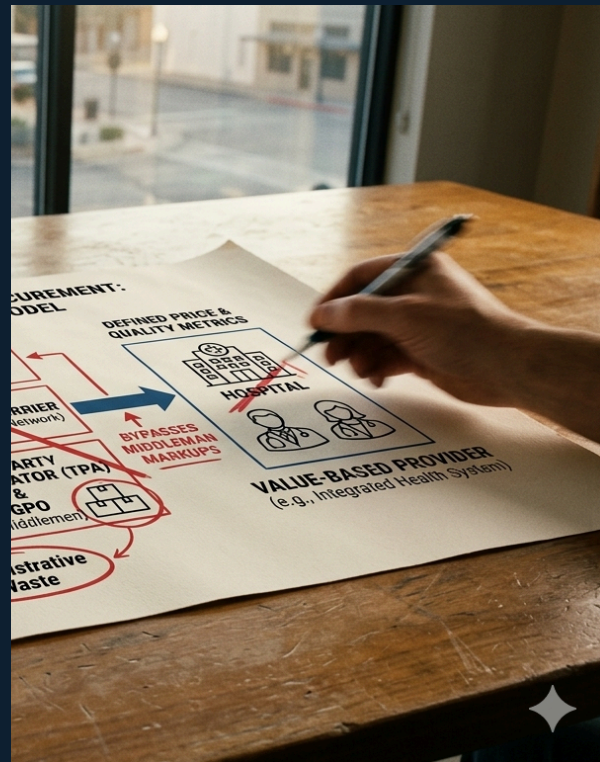
[Click for Content Calender App](#)



CONTENT *Inspiration*



CONTENT *Goals*



- ✓ Brand Awareness
- Broker Relationship Building
- ✓ Educate Audience
- ✓ Generate Leads
- Drive Direct Arrangements
- Grow Audience
- ✓ Build Trust
- Generate Apollo Io Replies

SUPPORTING *Content*



BLOG ARTICLE

Topic: How Employers Can Stop Overpaying for High-Cost Procedures

Keywords: Direct care, employer healthcare, self-funded, direct contracting, benefits broker, MSK, cardiac, oncology

Promotion: DCA website / David's LinkedIn

EMAIL

Topic: June Broker Outreach — Apollo IO Sequence

Inclusions:

<input type="checkbox"/> Product Promotion	<input type="checkbox"/> Testimonial
<input type="checkbox"/> Social Media Post	<input checked="" type="checkbox"/> Personal Story
<input type="checkbox"/> Lead Magnet	<input checked="" type="checkbox"/> Educational Tips
<input checked="" type="checkbox"/> Recent Blog Article	<input type="checkbox"/> Free Download

CONTENT
Themes



EDUCATION

- Tutorials
- Recommendations
- Definitions
- Formulas
- Tips & Tricks
- FAQs

CONNECTION

- Personal Story
- Behind the Scenes
- Inspiration
- Milestones
- Day in the Life
- Routines

PROMOTION

- Sales
- Lead Magnet
- Recent Blog
- New Products
- Testimonials
- Product Features

WEEK ONE: *June 1- June 7*

MONDAY



TUESDAY

xHi {{first_name}},
Benefits advisors are walking into a difficult renewal season.
Costs are up again. Employers are asking harder questions. And most brokers are still being forced into the same conversation: shop carriers, tighten networks, explain the increase.
The brokers building the strongest relationships right now are bringing something different.
At Direct Care Alliance, we work directly with employers and hospitals to solve the procedures that drive most plan spend: musculoskeletal, cardiology, oncology.
Transparent pricing. Direct arrangements. A care team that stays with the patient through the entire process.
We're not replacing the plan. We're solving the cases making the plan expensive.
Worth a conversation?
— {{sender_first_name}}

WEDNESDAY



THURSDAY

iew profile only. No message.

They'll see DCA's name in "Who viewed your profile."

FRIDAY



[Click for Content Calender App](#)



WEEK TWO: *June 8-June 14*

MONDAY



TUESDAY

Subject: The renewal problem nobody talks about
{{first_name}},
Most employers think their healthcare costs are uncontrollable.
What they're actually seeing is concentrated risk. A small number of procedures — spine, knees, cardiac events, cancer treatment — drive a disproportionate amount of total spend. The issue isn't usually utilization. It's pricing structure. DCA negotiates those procedures directly with hospital partners, with transparent pre-negotiated rates and care coordination built in. Same hospitals. Same physicians. Different economics.
That's the conversation brokers are increasingly bringing into renewals.
Happy to show you what that structure looks like.
— {{sender_first_name}}

WEDNESDAY



THURSDAY

{{first_name}} — renewal conversations are getting harder across the board right now. Would love to connect and share what we're seeing around direct employer-provider arrangements for MSK, cardiac, and oncology cases.
— {{sender_first_name}}

FRIDAY



[Click for Content Calender App](#)



WEEK THREE: *June 15-June 21*

MONDAY



TUESDAY

Hi {{first_name}}, this is {{sender_name}} with Direct Care Alliance.
We're talking with brokers whose clients are struggling with high-cost MSK, cardiac, and oncology claims heading into renewals. DCA works directly with employers and hospital systems to negotiate those procedures outside traditional carrier pricing.
Not a pitch — just seeing if this is relevant to your book right now.
Worth 15 minutes?

WEDNESDAY



THURSDAY

Subject: This was the moment brokers started paying attention {{first_name}},
One broker we work with told us: "I've been looking for something like this for years." Not because DCA was flashy. Because it finally gave them a real answer for the claims categories driving trend.
Most brokers already know the pattern: renewal increases, carrier reshuffling, narrow network adjustments, wellness add-ons. But the underlying cost structure stays intact.
DCA changes the economics around the highest-cost procedures instead. That's why brokers increasingly treat us less like a vendor and more like part of the strategy conversation.
Happy to walk through how it works.
— {{sender_first_name}}



FRIDAY



[Click for Content Calender App](#)



WEEK FOUR: *June 22-June 28*

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
	<p>LINKEDIN MESSAGE · Day 17</p> <p>{{first_name}}, the brokers winning the strongest client relationships right now are the ones bringing solutions that actually change cost structure — not just carrier options. That's where DCA fits. Happy to share examples if useful.</p>		<p>Subject: Close the loop? {{first_name}},</p> <p>I'll close the loop here.</p> <p>The reason I reached out: renewal conversations are changing quickly — especially for employers getting hit hardest by MSK, cardiac, and oncology spend. DCA was built for that problem specifically.</p> <p>If this isn't relevant right now, no worries. But if you reach a point where clients are asking for something beyond another carrier comparison, we're here.</p> <p>Either way, appreciate you reading.</p> <p>— {{sender_first_name}}</p>	

[Click for Content Calender App](#)



WEEK FIVE: *June 29-30*

MONDAY



TUESDAY



[Click for Content Calender App](#)



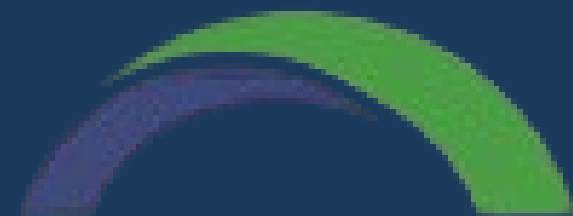
APOLLO IO SEQUENCING

- Tue–Thu
- 7:30–10am local
- 30–50/day to start
- Stop on reply

List filters:

- Benefits Consultant
- Employee Benefits Advisor
- Benefits Broker
- VP Benefits
- TX primary
- Southeast secondary
- Self-funded
- TPA
- Healthcare consulting keywords

[Click for Content Calender App](#)



Direct Care Alliance