



# Engaging HCPs in Post-Covid-19 Era

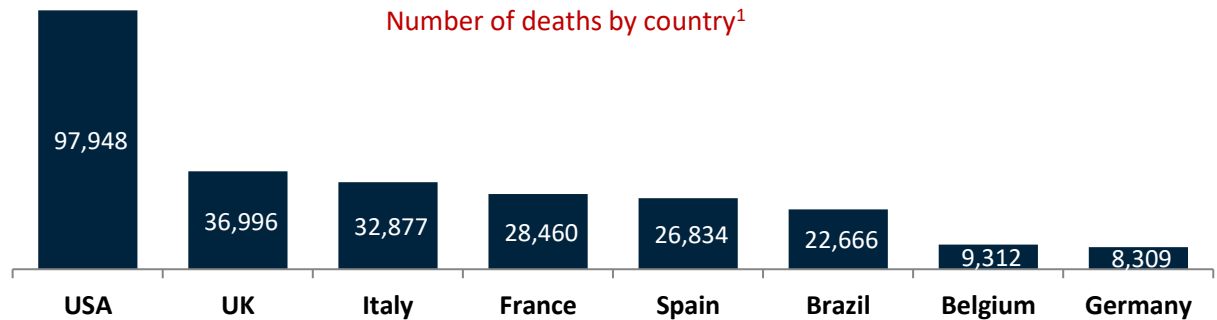
— SMART TOOL SERIES (#3) —

## Pre-defined Priorities for Pharma Affiliates

### Introduction

## The Covid-19 crisis is likely to leave permanent after-effects that Pharma Affiliates should seize to rethink their business priorities

- The Coronavirus disease 2019 (Covid-19) has spread in 227 countries and led to 344,503 deaths<sup>1</sup>, of which 76% are concentrated in 8 countries



- Half of the global population has been asked or ordered to stay at home by their government, with varying stringencies, to slow the spread of the outbreak

- However, considering that most countries are starting to lift, step by step, lockdown restrictions, at this stage of the pandemic, Pharma Affiliates should:

- Imagine how the Post-Covid-19 Era is going to change HCPs behavior
- Anticipate the impact of these changes on engaging HCPs
- Adapt the strategy, tactics and/or organization to these HCP behavioral changes

“The Covid-19 may offer a real opportunity for Pharma Affiliates to rethink their commercial operations”

Sources: Smart Pharma Consulting after Johns Hopkins University data

<sup>1</sup> As of May 25, 2020

## Introduction

In a previous position paper entitled “**Covid-19 & Business Continuity**”<sup>1</sup>, we have made practical recommendations on 4 topics to ensure business continuity during the lockdown

### Activities Prioritization

- Prioritize activities contributing firstly to protect the companies’ collaborators, their families and clients...
- ... and secondly to maintain the continuity of the business by ensuring the essential tasks<sup>2</sup>

### E-Meeting Management

- The generalization of E-meetings requires to train collaborators on “best practices” ...
- ... and to strictly apply the corresponding rules to ensure their efficacy and efficiency

### HCPs Relationship Management

- Face-to-face interactions with HCPs becoming very difficult, if not impossible,...
- ... in-field collaborators could remain connected by proposing services to help HCPs manage the situation

### Collaborators Engagement

- Collaborators, not familiar with work from home, should receive guidance to adjust and be productive
- They could be trained online, build high-quality plans and participate to imagine the Post-Covid-19 world

**Introduction**

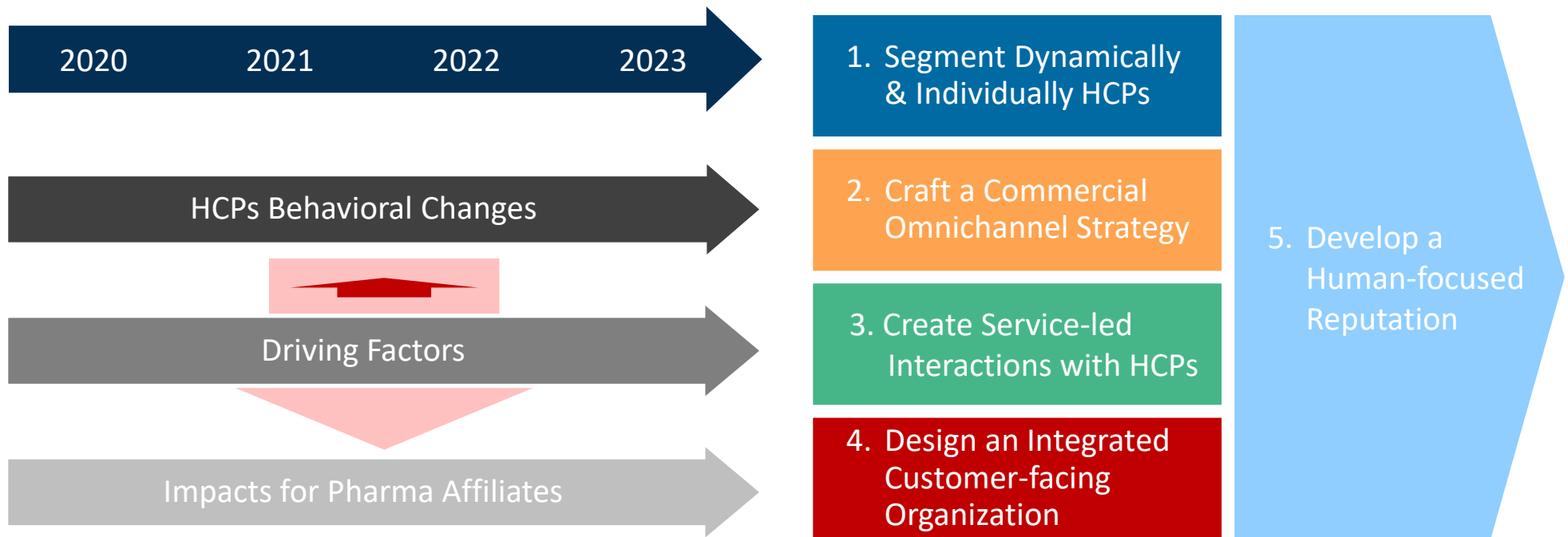
**To optimize HCPs engagement in the Post-Covid-19 Era, Smart Pharma Consulting proposes a method and selected tools, while pre-defining five essential business priorities**

– Part 1 –

HCPs Behavioral Changes & Impacts

– Part 2 –

Pre-defined Priorities



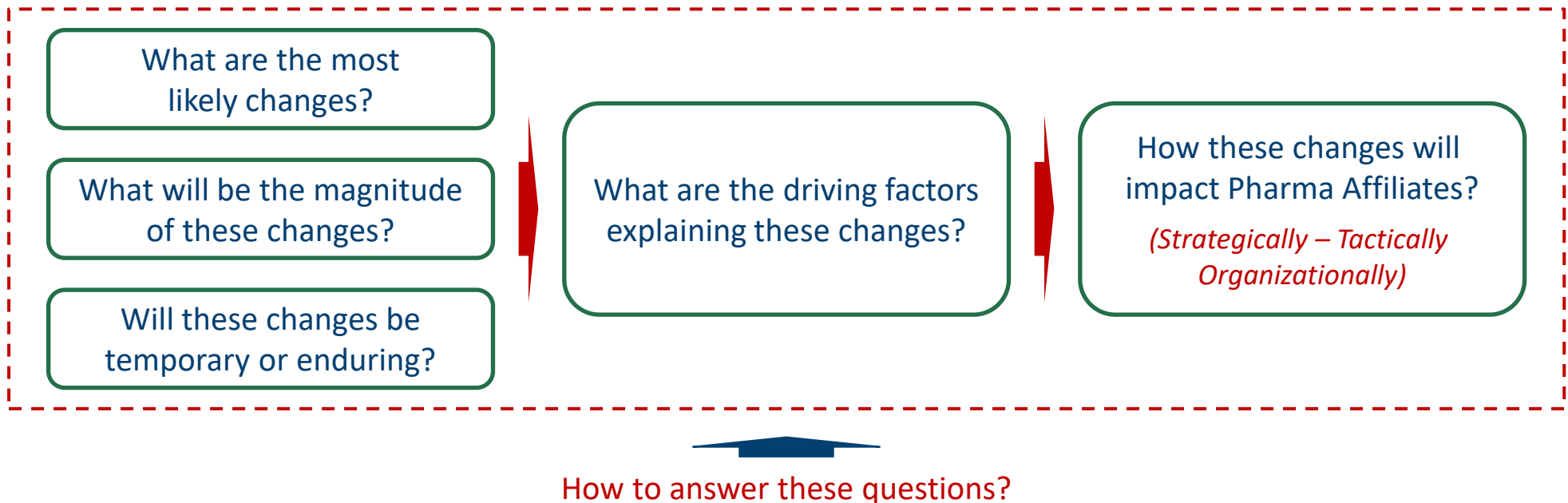
Sources: Smart Pharma Consulting

## Part 1 – HCPs Behavioral Changes & Implications

**At this stage of the crisis, it is impossible to figure out to which extent HCPs behavior with Pharma Affiliates is going to change, but it is the right time to start investigating**

Issues to be addressed

- Regarding HCPs behavioral changes induced by the Covid-19 outbreak and relevant to Pharma Affiliates, the following key issues should be addressed:



## Part 1 – HCPs Behavioral Changes & Implications

**The most relevant method to prefigure the Post-Covid-19 behavior of HCPs is to collect data from each individual HCP, by in-field collaborators of Pharma Affiliates**

HCPs Behavioral Changes

Key Individual Data Collection

Driving Factors

### Changes in HCP Medical Practice

- Will the HCP change his practice regarding:
  - Disease diagnosis?
  - Treatment strategy (initiations, renewals, switches)?
  - Patient care (hospital day-care vs. home-care)?
  - Disease monitoring?
  - Follow up of patient adherence to treatment?
- How will the use of telemedicine evolve vs. the Pre-Covid-19 Era?
- Will the institution (e.g. hospitals, healthcare centers) in which the HCP practices limit or forbid the visits by med reps, MSLs and KAMs?

### Changes in HCP Engagement with Pharma Affiliates

- Will the HCP reduce in-person and remote calls with med reps, MSLs, KAMs?
- Will the importance of in-person vs. remote calls evolve?
- Will the HCP modify his habits regarding attendance to medical meetings and participation to congresses?
- Will HCP expectations regarding the content of interactions with pharma companies significantly change?
- Will the relative importance of product features, related services and corporate reputation be modified?
- What does the HCP expect from Pharma Affiliates and their in-field collaborators following the Covid-19 crisis?

**Each question should be completed by the question “WHY?” to identify the corresponding driving factors**

## Part 1 – HCPs Behavioral Changes & Implications

**Changes in medical practices and engagement with Pharma Affiliates will vary in duration and magnitude according to each HCP and will have specific impacts at Pharma Affiliates**

Impacts for Pharma Affiliates

Data Analysis (1/2)

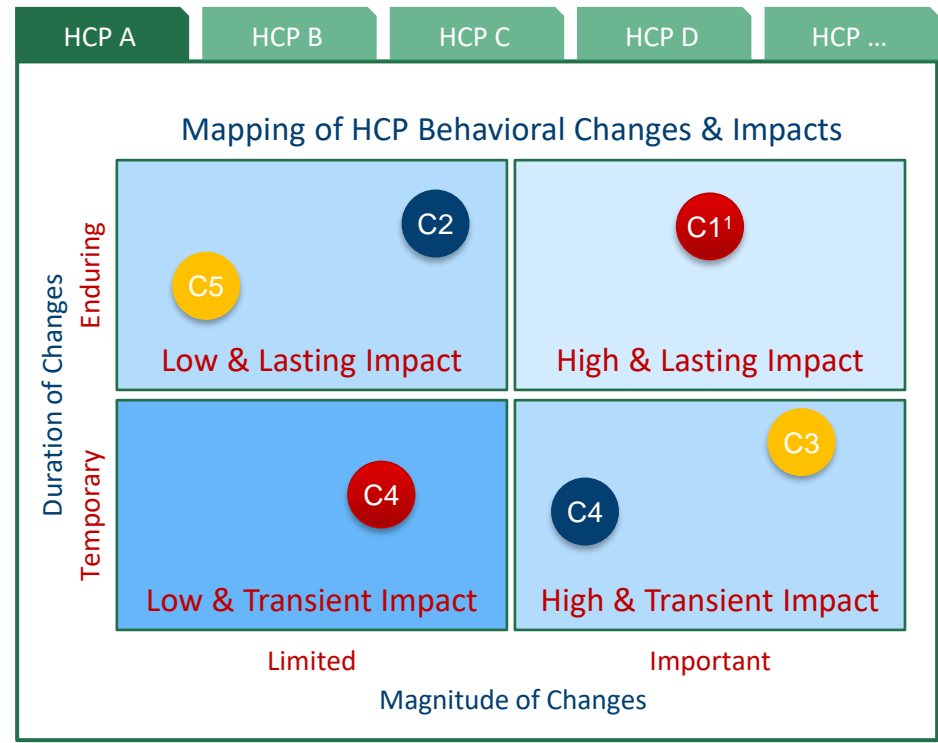
### Changes in HCP Medical Practice

- Will the HCP change his practice regarding:
  - Disease diagnosis?
  - Treatment strategy (initiations, renewals, switches)?
  - Patient care (hospital day-care vs. home-care)?
  - Disease monitoring?
  - Follow up of patient adherence to treatment?
- How will the use of telemedicine evolve vs. the Pre-Covid-19 Era?
- Will the institution (e.g. hospitals, healthcare centers) in which the HCP practices limit or forbid the visits by med reps, MSLS and KAMs?

### Changes in HCP Engagement with Pharma Affiliates

- Will the HCP reduce in-person and remote calls with med reps, MSLS, KAMs?
- Will the importance of in-person vs. remote calls evolve?
- Will the HCP modify his habits regarding attendance to medical meetings and participation to congresses?
- Will HCP expectations regarding the content of interactions with pharma companies significantly change?
- Will the relative importance of product features, related services and corporate reputation be modified?
- What does the HCP expect from Pharma Affiliates and their in-field collaborators following the Covid-19 crisis?

Each question should be completed by the question “WHY?” to identify the corresponding driving factors



Sources: Smart Pharma Consulting

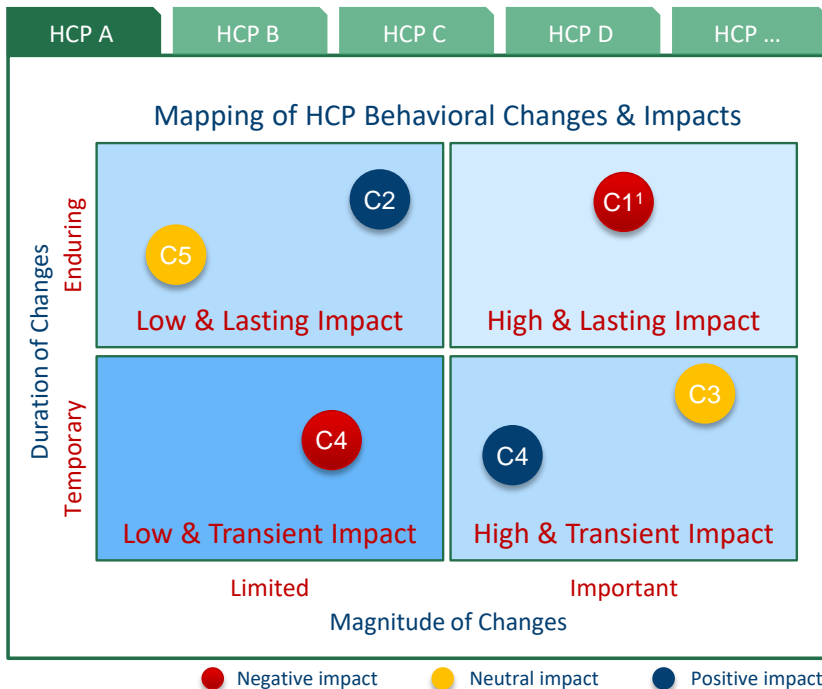
<sup>1</sup> C1: means behavioral change #1

## Part 1 – HCPs Behavioral Changes & Implications

The identification of each HCP behavioral changes will help Pharma Affiliates figure out the strategic, tactical and organizational adjustments to be made to optimize their performance

Impacts for Pharma Affiliates

Data Analysis (2/2)



### Strategic Impact

- Which HCPs should be targeted by in-field collaborators?
- How to reinforce the brand value by strengthening the three components of the “Brand Preference Mix”:
  - Product attributes?
  - Associated services?
  - Corporate reputation?

### Tactical Impact

- Which interaction channels should be used per HCP?
- Who, from the pharma affiliate, should preferably engage with each of the targeted HCPs?
- How to adapt the content of interactions to each HCP?
- What is the optimal level of interaction per HCP?

### Organizational Impact

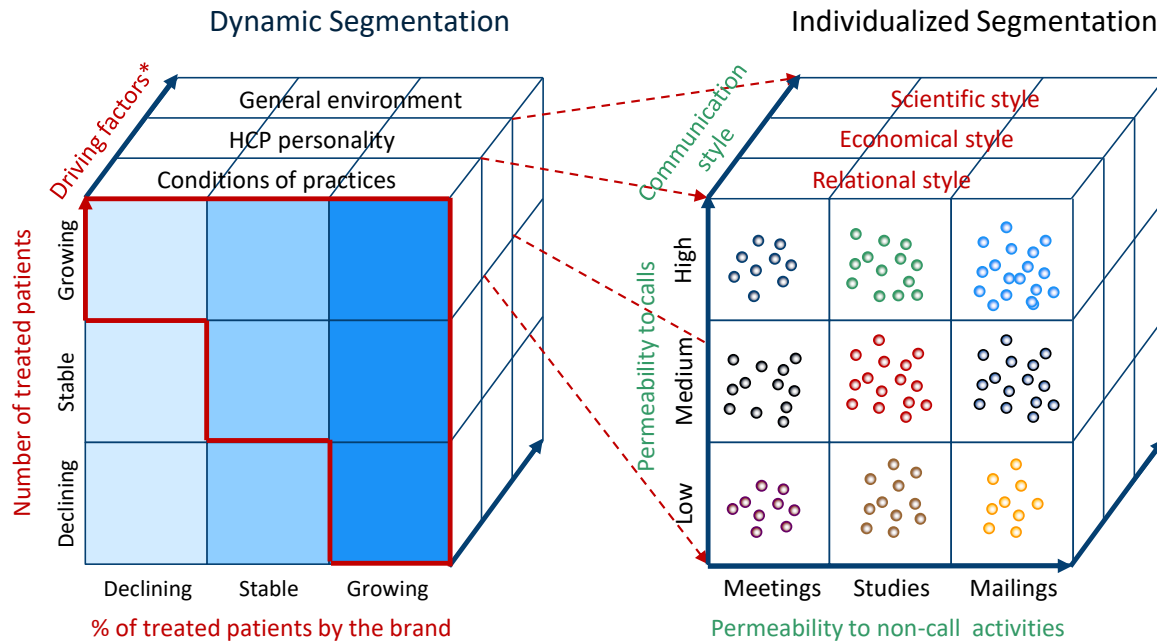
- How to design / redesign the pharma affiliate organization re.:
    - Activities and competencies of in-field collaborators?
    - Structure<sup>2</sup> of medico-marketing and sales departments?
    - Key processes associated to interactions with HCPs?
    - Cultural aspects of HCPs engagement management?
- to best support the revised strategy and the tactics



## Part 2 – Pre-defined Priorities

The individual and dynamic segmentation of HCPs enables to optimize their targeting and to define the most efficient level and nature of interactions to modify favorably their behavior

### 1. Segment Dynamically & Individually HCPs



- The dynamic and individual segmentation is based on behavioral criteria and designed to optimize the efficacy and efficiency of medico-marketing and sales interactions per HCP
- This approach has been formalized by Smart Pharma Consulting under the name of BPS<sup>1</sup> and consists in:
  - Segmenting dynamically each HCP, based on the evolution of its number of treated patients and of the weight of the pharma affiliate brand used
  - Determining the key factors driving each HCP behavior (environment, personality and practice)\*
  - Evaluating the degree of permeability (accessibility and sensitivity) to medico-marketing and sales activities and channels (e.g. calls, meetings, studies)
  - Adapting the activity and channel mix, as well as the communication style to the personality dominance of each HCP (relational, economic, scientific)

\* Environment (e.g. patient flow, regulations, public health initiatives, reimbursement, drug prices, influencers)  
Personality (e.g. early adopter, laggards, price-sensitive, science-driven)  
Medical practice (e.g. hospital vs. office-based practice, prescribing habits, involvement in clinical studies)

## Part 2 – Pre-defined Priorities

The Individual HCP Portrait keeps a track record of each HCP behavior regarding the marketed brands and his permeability<sup>1</sup> to medico-marketing and sales interactions, and his personality traits

### 1. Segment Dynamically & Individually HCPs

Individual HCP Portrait

HCPs	Total patients / Brand MS <sup>2</sup>	Permeability to Calls / Non-calls	Personality dominance
A	Growing / Stable	High / Mailings	Relational
B	Stable / Growing	High / Meetings	Scientific
C	Stable / Stable	Medium / Meetings	Economic



Individual Resource Allocation per HCP

HCPs	Calls #	Meetings #	Studies #	Mailing #	Messages / Style
A	10	2	0	3	Dialogue / Services
B	6	3	0	0	Scientific
C	4	3	0	2	Economic

- It is necessary to collect, store, analyze and retrieve for each HCP:
  - The impact of his behavior re. the number of treated patients and the market share of the pharma affiliate brands
  - His permeability to medical calls and other non-call activities
  - His personality traits
- In-field collaborators should be involved in the collection of those data, which should be updated on an ongoing basis
- The “Individual HCP Portrait” is used to set, per HCP:
  - The optimal level and mix of medico-marketing and sales activities
  - The appropriate message content and style of communication
  - This proposed approach helps to acquire a better understanding of factors driving HCPs behavior, and especially their brand preference

Sources: Smart Pharma Consulting

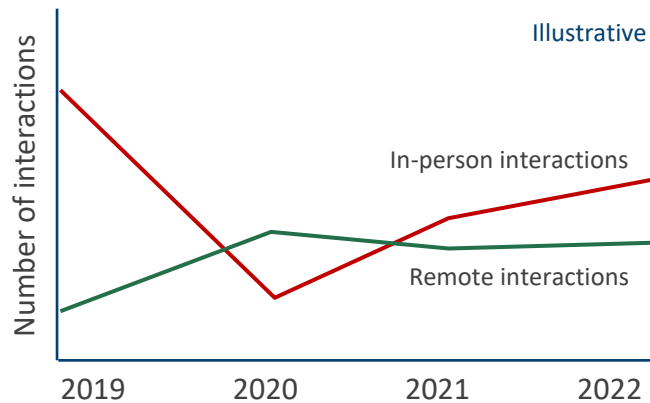
<sup>1</sup> Accessibility and sensitivity – <sup>2</sup> MS stands for Market Share or if the HCP is a prescribing physician, it can be replaced by Prescription Share (PS)

**Part 2 – Pre-defined Priorities**

**The absolute priority for Pharma Affiliates is to maintain regular contacts with each targeted HCP by offering the content he wants through the coordinated combination of channels he prefers**

**2. Craft a Commercial Omnichannel Strategy**

Evolution of in-person vs. remote interactions between Pharma Affiliates & HCPs



- In the Covid-19 outbreak context, in-person interactions between pharma affiliates and HCPs have fallen and been partially offset by remote contacts
- Until the Covid-19 crisis occurred, ~70% of medico-marketing and sales total interactions were coming from in-person contacts
- If most HCPs expect in-person interactions to resume after the crisis, they will reduce the overall number of interactions with in-field collaborators<sup>1</sup>, while increasing the weight of remote interactions in their contact mix<sup>2</sup>
- Therefore, to keep regular contacts with HCPs, Pharma Affiliates can craft an omni-channel strategy which consists in using multiple channels (media) in an integrated approach to optimize their impact
- For so doing, every channel must inter-relate to provide HCPs with consistent and high-value content provided by multiple sources

Sources: Smart Pharma Consulting

<sup>1</sup> Mainly due to the necessity to grant more time to treat patients and to the low value brought by most of in-field interactions –  
<sup>2</sup> The number of HCPs becoming familiar with digital tools has strongly increased, especially by experiencing teleconsultations during the Covid-19 crisis

**Part 2 – Pre-defined Priorities**

**Digital channels are not the panacea to cope with the Post-Covid-19 Era but, if well-executed and integrated into an individualized omni-channel strategy, they can help engage HCPs**

**2. Craft a Commercial Omnichannel Strategy**

**Five Rules for an Effective Omnichannel Strategy per Individual HCP**



**Rule #1** →

Identify each HCP preferred channels and usage patterns (e.g. frequency, time of the day, duration)

**Rule #2** →

Select one or several channels (in-person and/or remote, non-digital and/or digital) to be combined, according to the sought objective (e.g. message to convey, partnership to propose, service to offer)

**Rule #3** →

Adapt the content and the format to the channel specificities

**Rule #4** →

Plan carefully the execution of the omnichannel strategy while defining the right sequence of channels and the right timing

**Rule #5** →

Monitor the quality of execution with KEIs<sup>1</sup> and the impact of the omnichannel strategy with KPIs<sup>2</sup>

Sources: Smart Pharma Consulting

<sup>1</sup> Key Execution Indicators – <sup>2</sup> Key Performance Indicators. See the position paper: <https://smart-pharma.com/wp-content/uploads/2019/07/Smart-Management-Series-KPIs-KEIs-VW.pdf>

**Part 2 – Pre-defined Priorities**

**The purpose of service-led interactions is to secure access to stakeholders, and especially to HCPs, while boosting their preference for the company’s product portfolio**

**3. Create Service-led Interactions with HCPs<sup>1</sup>**

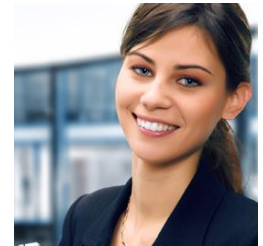
- In the case of physicians, an interaction (e.g. medical call, medical meeting) perceived as a service will lead to more regular contacts and...
- ... to a better memorization of the interaction content, a higher probability to convince them and an increased preference to the company’s product portfolio

▪ A service-led interaction is characterized from the...



**... Physician perspective...**

**... Med Rep perspective...**



... by an interaction which is...

- ... Interesting
- ... Useful
- ... Well executed

- ... Memorable
- ... Convincing
- ... Preferential

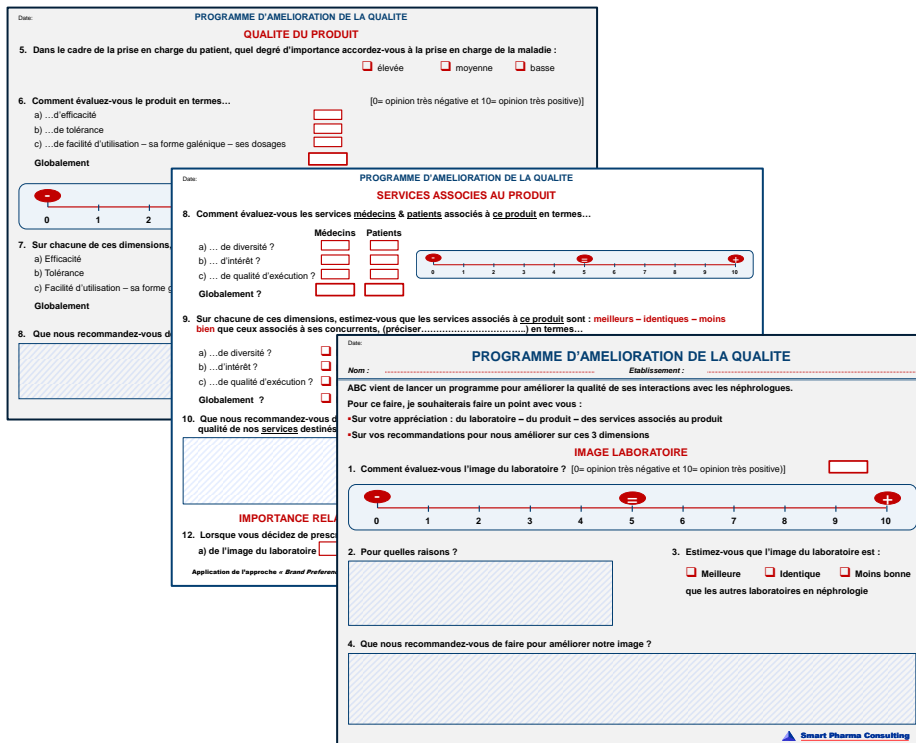
Sources: Smart Pharma Consulting

<sup>1</sup> After the Smart Pharma Consulting position paper "Service-led medical Calls to secure Access to Physicians & boost Brand Preference <https://smart-pharma.com/wp-content/uploads/2019/12/Service-led-Medical-Calls-VW.pdf>

## Part 2 – Pre-defined Priorities

The medical reps should measure once a year, during a face-to-face meeting, the opinion of each physician, and its evolution, regarding the quality of their interactions

### 3. Create Service-led Interactions with HCPs<sup>1</sup>



**PROGRAMME D'AMELIORATION DE LA QUALITE**  
**QUALITE DU PRODUIT**  
 5. Dans le cadre de la prise en charge du patient, quel degré d'importance accordez-vous à la prise en charge de la maladie :  élevée  moyenne  basse  
 6. Comment évaluez-vous le produit en termes... [0= opinion très négative et 10= opinion très positive]  
 a) ...d'efficacité   
 b) ...de tolérance   
 c) ...de facilité d'utilisation – sa forme galénique – ses dosages   
 Globalement   
 7. Sur chacune de ces dimensions  
 a) Efficacité   
 b) Tolérance   
 c) Facilité d'utilisation – sa forme   
 Globalement   
 8. Que nous recommandez-vous de

**PROGRAMME D'AMELIORATION DE LA QUALITE**  
**SERVICES ASSOCIES AU PRODUIT**  
 8. Comment évaluez-vous les services **médecins & patients** associés à ce produit en termes...  
 Médecins Patients  
 a) ... de diversité ?    
 b) ... d'intérêt ?    
 c) ... de qualité d'exécution ?    
 Globalement ?   
 9. Sur chacune de ces dimensions, estimez-vous que les services associés à ce produit sont : **mieux – identiques – moins bien** que ceux associés à ses concurrents. (préciser.....) en termes...  
 a) ...de diversité ?   
 b) ...d'intérêt ?   
 c) ...de qualité d'exécution ?   
 Globalement ?   
 10. Que nous recommandez-vous de

**PROGRAMME D'AMELIORATION DE LA QUALITE**  
 Nom : ..... Etablissement : .....  
 ABC vient de lancer un programme pour améliorer la qualité de ses interactions avec les néphrologues.  
 Pour ce faire, je souhaiterais faire un point avec vous :  
 \*Sur votre appréciation : du laboratoire – du produit – des services associés au produit  
 \*Sur vos recommandations pour nous améliorer sur ces 3 dimensions  
**IMAGE LABORATOIRE**  
 1. Comment évaluez-vous l'image du laboratoire ? [0= opinion très négative et 10= opinion très positive]   
 2. Pour quelles raisons ?   
 3. Estimez-vous que l'image du laboratoire est :  
 Meilleure  Identique  Moins bonne que les autres laboratoires en néphrologie  
 4. Que nous recommandez-vous de faire pour améliorer notre image ?   
 Smart Pharma Consulting

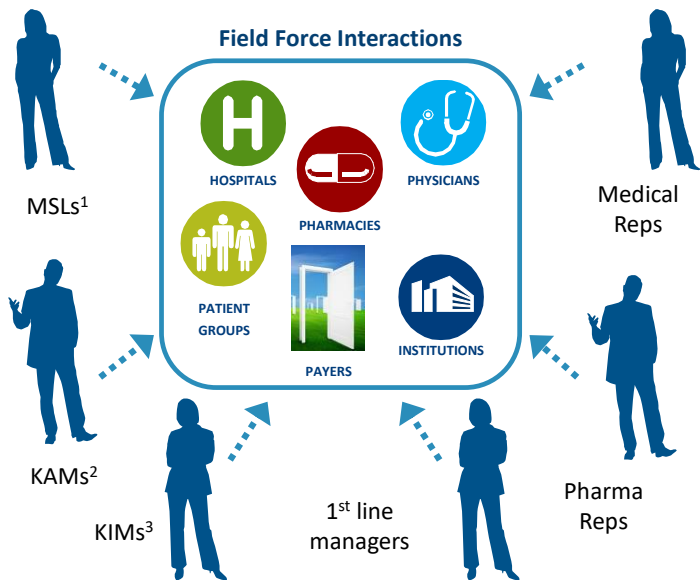
**IMPORTANCE RELATIVE**  
 12. Lorsque vous décidez de prescrire  
 a) de l'image du laboratoire   
 Application de l'approche « Brand Preference »

- The evaluation of the quality of the medical calls, as perceived by each physician, can be integrated in the measurement of the three components of the Brand Preference Mix:
  1. The perception of the promoted brand (efficacy, safety, convenience)
  2. The quality of the services proposed, amongst which the content of the medical calls
  3. The reputation of the Pharma Affiliate
- This measurement provides the medical reps with:
  - A better knowledge and understanding of the physician
  - A more robust identification of the specific actions and messages the most likely to strengthen the brand preference

## Part 2 – Pre-defined Priorities

To achieve Excellence in Execution, companies must design a holistic organizational system that will foster the search for excellence by all their collaborators, front line and back-office ones

### 4. Design an Integrated Customer-facing Organization



- **Field Force Activities:**
  - Stop activities having no significant impact to raise / maintain brands' value
  - Acquire a high level of market insights<sup>4</sup>
  - Propose and deliver highly valued services, and leverage the corporate image<sup>5</sup>
- **Field Force Structure:**
  - Set up a flat organizational chart to favor accountability and empowerment
  - Design an adaptative structure that can be easily modified to environment changes
  - Co-position functions (e.g. MSLS and medical reps) that share the same customers
- **Field Force Processes:**
  - Foster / impose cross-functional collaboration and cohesion to leverage synergies
  - Carefully plan key activities and monitor the quality of their execution and their impact with key execution indicators (KEIs) and key performance indicators (KPIs)
- **Field Force Culture:**
  - Develop a culture of customer preference to increase brand market share
  - Encourage pro-activity, agility and experiment to find solutions to excel in execution

## Part 2 – Pre-defined Priorities

**Covid-19 crisis has shown the fragility of our overall society and led many citizens, including HCPs, to reflect on the meaning of their life and to refocus their priorities on human values**

### 5. Develop a Human-focused Reputation

#### Pharma Industry Reputation & Covid-19 Crisis

- Most pharma companies have been exemplary in managing their collaborators and their customers since the beginning of the Covid-19 outbreak:
  - They have shown kindness to their employees for whom the lockdown has been a challenge
  - They have secured the supply of drugs on the hospital and retail pharma markets
  - They put themselves at disposal of stakeholders, especially HCPs in case of specific needs
- They have a great opportunity to strengthen ties with their collaborators – even if these ties remain fragile considering the upcoming economic crisis and increasing price pressure expected on drugs

#### Implications for Pharma Affiliates Reputation

- If the pharma industry reputation is unlikely to change dramatically, as a result of the Covid-19 crisis, there is, however, a window of opportunity for individual affiliates
- Corporate reputation is particularly important to enhance HCPs brand preference when products are little differentiated, which is the great majority of cases
- Pharma corporate reputation, from HCPs perspective, is mainly driven by:
  - The quality of their product pipeline and portfolio
  - The quality of their relationships
  - The quality of services offered to HCPs and patients
  - Their societal commitments and their “HUMANITY”

**“The general feeling is that so far, pharma companies did the job”**



## Part 2 – Pre-defined Priorities

# Pharma Affiliates should craft and implement a strategy to do “business with more humanity” and communicate regularly on the corresponding benefits for its stakeholders

### 5. Develop a Human-focused Reputation

#### Why Pharma Affiliates should be Human-focused?

- During the Covid-19 crisis, pharma companies and their affiliates have shown their humanity by giving priority to the security of their employees and by supporting their customers
- It is probably the right time for pharma CEOs to manage their company for the benefits of all stakeholders (i.e. employees, customers, suppliers, communities, shareholders)
- Customers, including HCPs, want – more than ever – to interact and collaborate with companies having put human relationships at the heart of their corporate purpose



#### 5 Imperatives Pharma Affiliates should put in Practice<sup>1</sup>

1. Meet or exceed HCPs and other customers (e.g. patients, PAGs, payers, health authorities) expectations
2. Invest in employees by offering fair compensation, supporting their development while respecting them
3. Deal fairly and ethically with suppliers
4. Implement corporate social responsibility (CSR) programs likely to have a significant benefit for the society on economic, social and environmental aspects
5. Generate long-term value for shareholders by being a human-focused company and proving it on a day-to-day basis

“In the Post-Covid-19 Era, customers will favor companies with a deep human purpose”

### 3. Key takeaways

**These five pre-defined priorities should help Pharma Affiliates adjust to the change of the HCPs expectations, so that to keep them engaged in the Post-Covid-19 Era**

#### 5 Pre-defined Priorities

##### 1. Segment Dynamically & Individually HCPs

- The individual and dynamic segmentation of HCPs enables to optimize their targeting...
- ... and to define the most efficient level and nature of interactions to modify favorably their behavior

##### 3. Create Service-led Interactions with HCPs

- The purpose of service-led interactions is to secure access to stakeholders, and especially to HCPs...
- ... while boosting their preference for the company's product portfolio

##### 2. Craft a Commercial Omnichannel Strategy

- Digital channels are not the panacea to cope with the Post-Covid-19 Era...
- ... but, if well-executed and integrated into an individualized omni-channel strategy, they can help engage HCPs

##### 4. Design an Integrated Customer-facing Organization

- To achieve Excellence in Execution, companies must design a holistic organizational system that will foster the search for excellence by all their collaborators, front line and back-office ones

##### 5. Develop a Human-focused Reputation

- Pharma Affiliates should craft and implement a strategy to do "business with more humanity" ...
- ... and communicate regularly on the corresponding benefits for its stakeholders

Consulting firm dedicated to the pharmaceutical sector operating  
in the complementary domains of strategy, management and organization

### The Smart Tool Series

- This new series intends to provide practical tools and recommendations to enhance the efficacy and efficiency of the most important activities or processes in place within pharma companies
- Our tools and recommendations are based on both:
  - Our consulting experience in the pharma sector
  - Our research for innovative, pragmatic and useful solutions
- Each issue of this new series has been designed to be read in 15 to 20 minutes and not to exceed 20 pages

### Issue #3: **Engaging HCPs** in Post-Covid-19 Era

#### Pre-defined Priorities for **Pharma Affiliates**

- The identification of HCPs behavioral changes will help Pharma Affiliates figure out the strategic, tactical and organizational adjustments to be made to optimize their performance
- We have pre-defined five priorities to help Pharma Affiliates adjust to the changes of HCPs expectations, so that to keep them engaged in the Post-Covid-19 Era

### Smart Pharma Consulting Editions



- Besides our consulting activities which take 85% of our time, we are strongly engaged in sharing our knowledge and thoughts through:
  - Our teaching and training activities
  - The publication of articles, booklets, books and expert reports
- As of today, more than 80 publications in free access can be downloaded from our website
- Since 2012, we have published:
  - 18 business reports (e.g. The French Pharma Market)
  - 9 position papers in the “Best-in-Class Series”
  - 6 position papers in the “Smart Manager Series”
  - 3 position papers in the “Smart Tool Series”
- Our research activities in pharma business management and our consulting activities have shown to be highly synergistic
- We hope that this new publication will be useful for you
- We remain at your disposal to carry out consulting projects or training seminars to help you improve your operations

Best regards

Jean-Michel Peny