

A Guide to Email Marketing in Life Sciences

**Tips to Help You Connect
With Your Customers**



Does Email Work Anymore?

With more than 205 billion emails sent every day, email marketing is the most commonly used channel to connect with audiences across industries.¹ It is not hard to understand why it is so reliable:

- The return on investment (ROI) of \$38 to every \$1 spent is hard to beat
- It is highly scalable
- Personalization is no hardship
- Mobile reach is made easy¹

Marketing Information



of physicians said an email with product info has more of an impact than a digital ad on a website



of physicians check their email at least 2 to 3 times a day

Source: Why You Should Include Email in Your Healthcare Provider Marketing Tactics - Infographic. Vodori

The importance of email marketing rings especially true in life sciences where hard-to-reach healthcare practitioners (HCPs) are in search for useful information to better serve their patients. According to the Pharmaceutical Physician Survey of 2017 where 200 American Medical Association (AMA) practicing physicians provided their valuable insights, the majority of HCPs check their inbox 2 to 3 times a day and have expressed preference to receive information from pharma, biotech, and med-device companies through this medium because of its less disruptive nature and its convenience.^{2,3}

For the increasing number of patient groups that are taking charge of their health and getting more informed before doctors' appointments, creating a database of patients can be the winning strategy for the future of customer engagement.

Despite these facts, email marketing is no sure bet in life sciences. Open rates and click-through rates can be quite low. The challenge is understanding why. As there are many factors that can affect campaigns, we will look at the top reasons that may be driving your engagement down with HCPs and patients.

Email Marketing: What Is the Right Recipe for Optimal Engagement?



Before initiating any life sciences marketing campaign, the following important questions must be answered:

- What should be the ideal frequency of deployments for the audience?
- How do you balance corporate messages, portfolio-level messages, brand-level messages, and rep-triggered emails to the same HCP while still providing valuable information that the HCP is looking for, such as unbiased information on disease states?
- How do you get past the strong IT spam filters within hospitals or integrated delivery networks (IDNs)?
- What should be your domain, how do you warm it up, and can you optimize the results with a creative “friendly from” (alias name)?
- How can you create an opted-in list of HCPs to get the open and click-through rates you want, which will be more than a list of just a few hundred HCPs? Do you have to partner with an HCP network or is it possible to do it internally to minimize the costs and ensure that it is appropriately branded?

We will try to tackle these pain points one by one so that you can spend less time in planning and executing disparate campaigns and more time in gathering insights on what your customers are looking for.

Let Us Set Goals and a Strategy to Make Your Life Simpler

We often move so quickly from one campaign to the next that we lose track of our actual goals. To effectively communicate with HCPs and patients and strengthen our relationship with them, we need to solve their problems and differentiate our product and services from other competitors.



Setting Your KPIs

Overall, you should set key performance indicators (KPIs) at the start of every quarter. Campaign results of the last quarter should be reviewed in order to set campaign goals for the upcoming quarter and check-in on whether the results reflect healthy campaigning.

As a benchmark, opted-in targets should be responding with an open rate of 15% to 20% with a click-through rate of 4% to 5% or more. Anything below that may call for a review of the messaging, the campaign plan and setup, or is an indication that the list being used is experiencing fatigue.

Building “Responsiveness”

It is important to note that most HCPs are looking for educational information and are less interested in product marketing that reps are already providing as their main message. One of the first strategies to consider is building an “unbranded” email strategy that allows HCPs to get the disease state-related information they are looking for, especially if the disease is a rare one. This will allow your list to build “responsiveness” to your organization’s brand as a source of unbiased information.

So, although it is not branded with your product’s logo, it should be subtly branded in the footer with your company’s logo. You can even consider building a sub-brand for this disease state campaign and its own website. This strategy will require a higher budget and a lot more time but will likely yield far better results in terms of engagement. The only downside is that it the campaign engagement may not so easily reflect an interest in your products, but it will likely boost your brand affinity.

If we are looking to keep it easy and budget-friendly, you may want to connect with your med-legal team to see what is possible when driving HCPs to your brand's website. Can a company's logo be in the header or footer while driving to your product's resource section or does the product logo have to appear somewhere else? Not all life sciences organizations follow the same rules, but, surely, if you explain to your med-legal that branded content risks are seeing lower results because of the perception HCPs have that the branded content is biased, your med-legal may come to a compromise such as including your product logo in the footer instead of in the header.

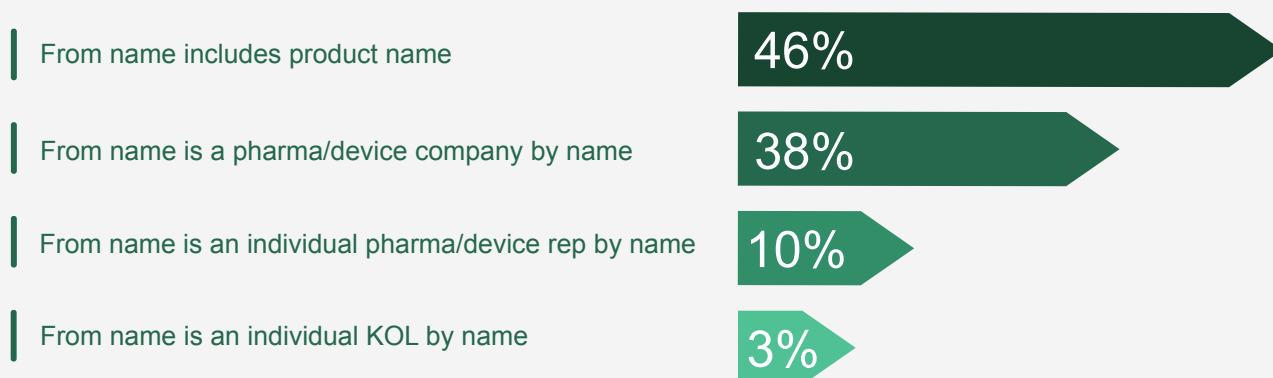
Either way, this simplified campaign would last for 1 to 2 years, covering say 15 off-the-beaten path topics, which may be solved by your product or from a set of issues that patients or HCPs are struggling to learn from other online sources. The email domain should reflect the website's domain that you are driving to after the '@' sign in order to stay out of spam filters or get blacklisted. For a disease state campaign, this would mean, for example, that your email domain and alias would appear as Chronic Pain Insights [Pfizer@Celebrex.com]

This new domain will need to be warmed up through small deployments (500 targets or less) every 10 days, ideally on a Tuesday or a Thursday, for 4 to 6 months in order to develop a domain reputation with email clients such as Gmail and Hotmail, and to get beyond IT filters at various hospitals.

The "friendly from" or alias as many call it, which in this example is "Chronic Pain Insights," can be something you A/B test, and if you are worried about getting bound to a bad alias, you can have 3 to 4 aliases approved by your med-legal while the rest of the campaign content is being approved. The "friendly from" does not need to remain the same throughout the campaign; however, as it is what the user will see regularly, it should remain the same once you start to see a response from your list.

At about the 1-year mark, you will want to start deploying product-focused messages in parallel to your disease state campaign. At this time, it is important to start using the product name in the alias.

What Is Important to Physicians in a "From Name"?





Partnering to Gain Opted-In Targets

Often, it is during this “unbranded” phase that many life sciences organizations opt to partner with HCP or patient networks. While this is a great strategy for launches in which you need a lot of eyes on your content quickly, the long-term benefits of partnering with external vendors is both costly and has limited gain for your brand. Here is why: often these networks claim to have thousands of active HCPs or patients but only a very small percentage, sometimes <5%, are actually active within the database.

This means that you are paying for the full database but only gaining a small amount of engagement. It also means that after about 6 months, you may not gain so much traction from these targets who may initially respond to the new source of information because they are being bombarded with email campaigns from across the industry but fizzle out interest-wise.

Although a great short-term strategy, over time, you will not be building your internal list of active “responders” because these database/portal providers may not allow your target HCPs or patients to opt-in to your brand updates. As such, it is always best to build your own “responder” list internally while using these sources as an extra push for your brand and website traffic in small stints to limit the bleed on budget.

The Ideal Content to Drive HCP Interest

75% of marketing leaders in life sciences and healthcare admit that they either broadcast identical messages across email and other channels or that they don't coordinate between email and other channels at all.⁴



As physicians often feel that pharma branded websites provide biased information, it is important to provide disease state information in a way that it does not promote your product as the ideal solution. Having videos from key opinion leaders (KOLs) and [patients](#) like Biogen has done for Tecfidera in the past, which are fun yet informative, can really help with gaining trust from your target audience.

Disease state guidelines (e.g., measuring chronic vs acute arthritis) and short blogs from patients on topics unrelated to the drug itself but focused on some of their day-to-day challenges on living with the disease do attract audiences. The tricky part is finding those vocal patients! Meeting patients at public events and building a relationship with the various patient associations may allow you to compliantly invite them to write an unbranded blog post.

If you plan to use product-level information such as efficacy within email campaigns, it is important to wrap this content with another layer of information such as a new patient program service or an HCP benefit to keep the interest levels high and product information as a secondary message. No matter how great that brand creative may look, HCPs are just not interested in product facts, unless you are new to the market or have a new indication to announce, in which case go for it! Take advantage of your window to use “new” in as many ways as possible.

What Content Is Most Used by Scientists?

Manuals/Protocols, literature citations, and product FAQs are the forms of content created by suppliers that are most frequently used by scientists when learning about new products.

Vendor-Created Online Content Utilized in the Past Year



Source: Bioinformatics LLC.



Self-Service Portals Versus the Traditional Brand Website

[Self-service portals](#) that serve as a one-stop shop for intelligent, personalized omnichannel services including chatbots may be another long-term strategy that can be paired with your email campaign. Driving HCPs to one location for all their day-to-day needs does help with overall engagement is important that the page is built to focus on the customer experience first rather than driving home efficacy messages that they are likely already aware of.

Here you can include services such as on-demand meeting requests, call-to-actions with their favorite hybrid rep, med-info lines, and specialty call center teams. Some more forward-thinking life sciences organizations are also including an ability to swiftly request samples—which serves well when the commercial team may not have access to doctors or cannot schedule a face-to-face (F2F) visit because of a busy period such as COVID-19. Introducing a self-service portal only makes sense once you have active data based on the responders from your disease state campaigns. Otherwise, activity within this portal will fall flat.



How Often Should You Email Physicians and Patients?

The frequency of deployment depends on the content and level of engagement your emails are getting from your customers. Product-focused content should not be sent more than once per month, whereas education-driven campaigns can be sent every 10 days. It is also important to understand how other brand teams or corporate teams may be targeting the same HCPs. Engagement levels may be down due to a lack of coordination of campaigns across different teams. If you are an organization that heavily relies on email campaigns, segmentation between brands and a corporate email calendar will be key to keeping opt-outs low across the organization. Using a [modern life sciences CRM](#) that can set business rules for marketing automation strategies across brands and the corporate teams will also make deployment management and planning much easier.

Structured opt-in and opt-out pages are also another strategic way of minimizing the impact of a bad email campaign. This way, the HCP or the patient can opt-out from one part of a company's communications: at the brand level, at the corporate level, from certain rep-triggered emails, and so on.

Eventually, if all is going well, your list of responders (those who open or click within your emails) should be increasing over time and these targets should receive the content more frequently than your non-responders (those who are not opening and clicking your emails). It is best to email non-responders once every 1 or 2 months to avoid high opt-out rates.

Opt-outs should remain under 1% or 2%. Any spikes in opt-out rates indicate that your team or organization may be deploying too frequently. Responders who subscribe to the content on your website or open email content consistently can be emailed once every 10 days with new and relevant content.

Rep-Triggered Email

Field team email campaigns, despite seeming like the best approach to a personalized experience, have tendency to fail in life sciences. Typically, there is a lot of excitement at the launch of the rep-triggered capability; later on, the customer-facing teams lose steam or do not see the direct impact of their efforts and reduce the number of emails that they trigger. Their success also depends on the relationship between the HCP with the rep and the quality of the content. A follow-up email around efficacy may not do so well but sharing an email with a link to a KOL video that covers the topic of efficacy may perform better.

Whatever the content, there should be business rules in place to stop the rep from triggering emails more than twice a month and the same settings should control the spacing of similar topics between sales and marketing. Lastly, every 3 to 6 months, a new series of content should be developed and the team leads could look for ways to get the field teams excited about sharing this content after calls.

Opt-Out Management

Beyond structured opt-in and opt-out management, to avoid emailing customers even after they have unsubscribed, ensure you have a unified database of all your customers that all departments in your organization use. Also, set a business rule in the CRM that stops field and marketing teams from deploying to that contact based on the opt-in and opt-out data received. Automation should be in place to collect these data across all channels. With regulations such as GDPR and CAN-SPAM being enforced, it is vital to safeguard the privacy of users' data as well as comply to their opt-in/opt-out preferences.

Segmenting Audiences Based on the Customer Journey

One way to make your emails more engaging to your customers is by segmenting your list according to the customer journey. If you are able to track and group customers based on their awareness and engagement with your organization, you can make your campaigns more intelligent and send the right content to the right audience at the right time to make the greatest impact in their journey. HCPs leave digital traces across all your channels, and with the [right technology](#), you can create dynamically segmented lists to send emails personalized to their needs. One size surely does not fit all in this modern era.



Nurturing Versus Sales Engagement

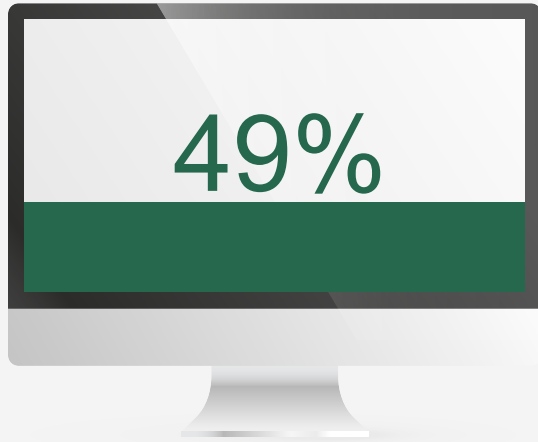
Field targeting should be based on some level of nurturing achieved by the marketing team. Although this is not a common practice in life sciences, engagement levels from marketing initiatives should be visible to the sales teams within their CRM. Progressive movement from awareness to consideration should be measured by marketing, and this segmentation should be made visible to the customer-facing team through CRM platform updates such as through embedded customer insights in their user interface. Today, advanced [marketing automation tools built into CRMs](#) actually allow for the marketing team to schedule a field visit.

Developing Email Templates

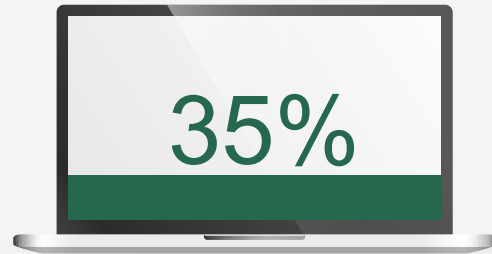
New email formats can often take hours to create, so it is best to develop reusable templates for different kinds of emails such as content sharing, invites to webinars and events, product information, and newsletters. Footers should be standardized, and each template could have a mobile version as well. Modern CRM systems, called customer experience management (CXM) platforms, also provide a drag-and-drop functionality to make creating and updating content a breeze, minimizing your agency's involvement and avoiding hefty fees.

Primary Devices Used to Read Email

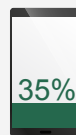
Desktop



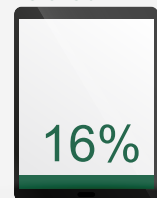
Laptop



Mobile



Tablet



70%



Preview Emails

Preview their emails on a mobile device before reading them on a computer/tablet

Mobile-First Designs

With most HCPs previewing emails on their smartphones before reading them on a computer /tablet, it is important to create mobile-friendly content. Visuals need to be easy to read and enticing enough to draw the HCPs back for a second look on their desktop. Templating of responsive-design emails is a great option. It reduces the need to redo headers and footers and allows creative teams to focus on optimizing small sections of content called “modules” for mobile use.

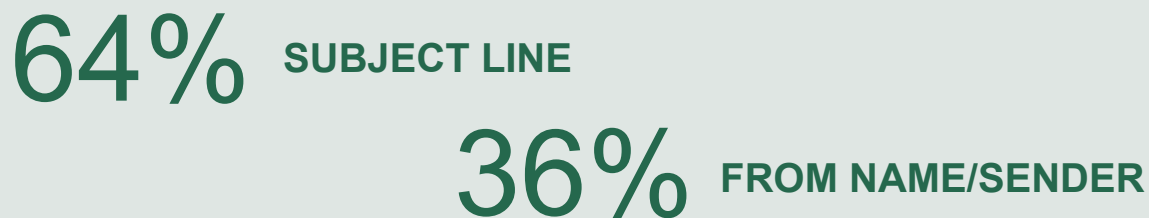
It is all about balancing the creation of enough fresh content with the goal of perfecting it. Content fatigue is common in life sciences because of poor planning, frequency of safety updates, and med-legal time constraints. Approving as much content as possible in one shot is likely the best bet.

A/B Test

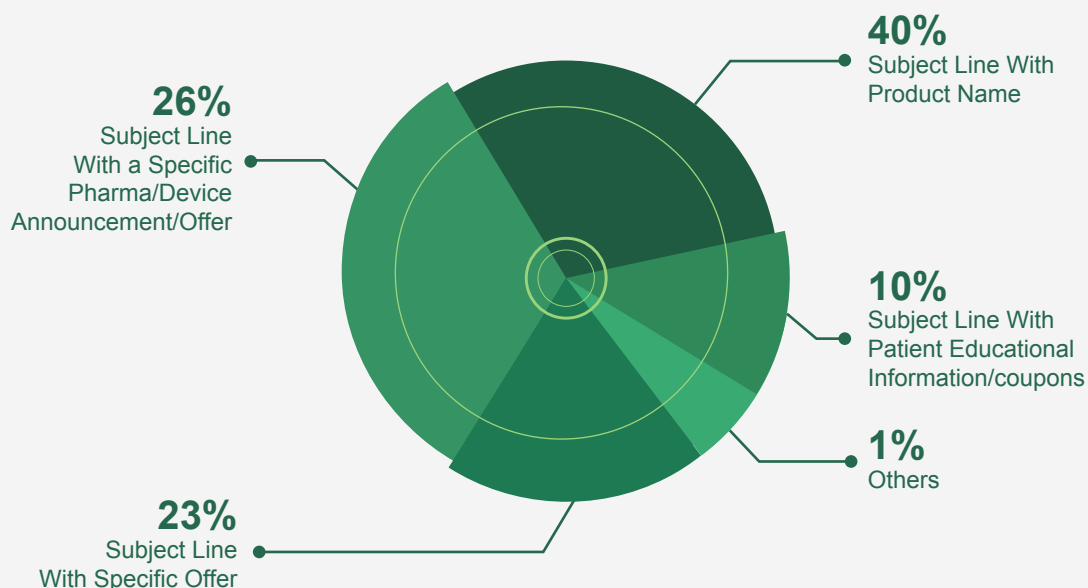
Yes, A/B test those subject lines, content, and calls to action (CTAs) with modern marketing automation tools and send your best performing emails to your customers. It will require a little more work upfront with your med-legal team to get a few options approved, but it will be worth it in the end! Additional resources could be tools such as [Send Check It](#), a free-to-use tool that scores your headlines and tells you how likely your headlines will lead an HCP or a patient to open your emails. If you can get your product name approved as part of the subject line without it being very lengthy, you are more likely to have good open rates.

Explore having your alias explain the disease state paired with the product name in the subject line for the ultimate win!

What Prompts HCPs to Open a Pharmaceutical Email?



What Is more Important to Physicians in a “Subject Line”?



Images and CTAs

Avoid the overused doctor-patient images that look too posed. Use images that help your brand stand out and project a confident and positive attitude. Focus on a few elements to support the value of your products or services with a few clear CTAs in prominent locations. The color of CTA buttons should stand out from the rest of the content to increase click rate.

Creating a brand design guidelines document is the best way to ensure consistent branding and increase brand recall with physicians.

Avoid using a JPEG with all your content built into these images. This is not mobile friendly, despite it appearing nice on desktop, and risks not being read if the images are not automatically downloaded.

Test, Test, Test Before You Hit Send

You can create a test list of your colleagues for all campaigns that you send a few hours before your campaign deployment to see if there are any typos, formatting errors or technical issues. Tools such as [Email on Acid](#) help you test your emails across devices and operating system (OS) types. You can even test your email content with online tools to avoid spam traps and remove keywords that trigger spam.

Personalization

While personalizing emails by adding a first name is common enough, you can also personalize emails by account name, develop slightly different messages by HCP specialty, and even have different landing pages (unique URLs) for the same campaign, based on the number of differentiating pain points by persona or segment. Warning: avoid over-engineering this type of personalization because this may get too complex for med-legal review and may not be worth the level of effort for the potential impact. Pick and choose the timing of this level of personalization, such as for very important announcements or staple content you know will be around for a long time.

CTA

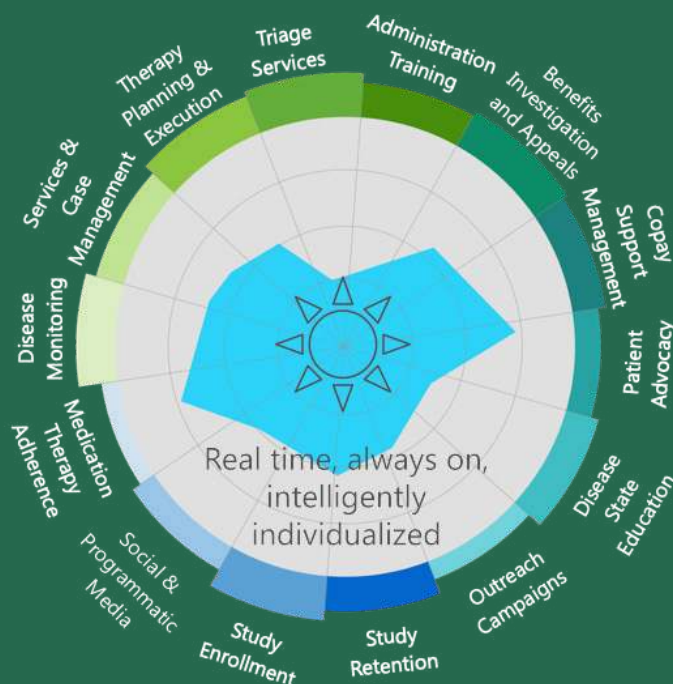
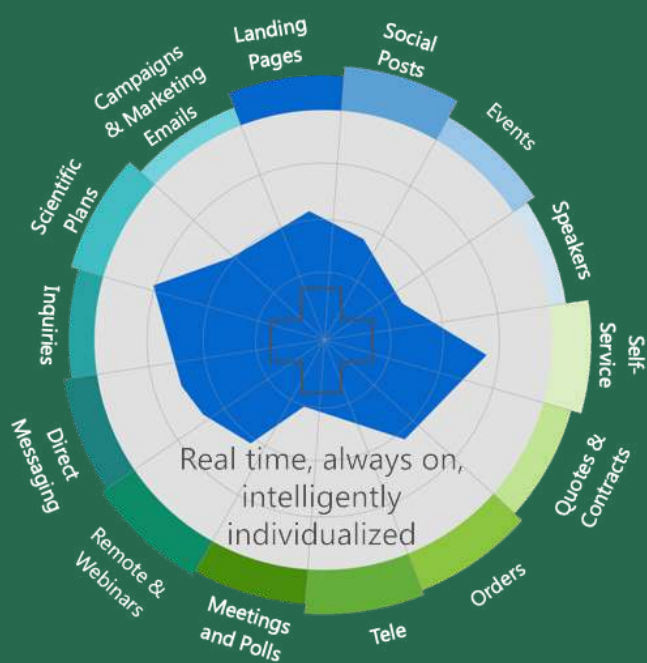


Engage Customers Across Channels

Customers now expect omnichannel-enabled content and entry points. As HCPs move from one channel to another, using the channel most convenient to them, they expect their preferences to be passed along seamlessly. Brands also need to be able to gather data across channels in order to continue helping customers along their journey. Passing on the HCP preferences and context to the next active channel should not be a manual task.

Email is often the first point of contact with a prospect, unless the lead was captured on the website earlier. With the right website tracking, returning visitors should be segmented based on their interests. New segments can thus be created for more personalized email marketing. Interactions on social media, with chatbots, and conversations with sales reps should be used to continue the conversation with each customer. The days of broadcasting emails to data-base lists are truly over, with all the great technology we have at hand.

[Talk to Exeevo](#) today to see how we can transform your marketing automation efforts with intelligent, unified life sciences CXM.



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