

Mastering CX for specialty care



in the digital age

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Executive summary

These are the best and the worst of times for specialty care businesses across life sciences.

As healthcare emerges from the chaos of Covid, specialty clinicians are under pressure to treat patients whose conditions have, tragically all too often, progressed for want of earlier diagnosis and treatment. Likewise many of the organizations they work in have further tightened access restrictions, which were already becoming commonplace prior to the pandemic.

Pharma stands ready to help while working to adapt to the new engagement paradigm. In-person HCP meetings are now at a premium. HCPs have little time for undifferentiated messaging. Increasingly they crave 'just-in-time' answers from MSLS and have less time to engage with commercial field teams.

It is clear, that there's no going back to how things were pre-pandemic.

However, this new reality also offers new opportunities for pharma to serve their customers including patients, better. The flexible and agile use of multiple digital channels can enable pharma to work with specialty care teams and their patients in a far more targeted and personalized way, led by the specific needs of individuals at the time and in the manner of their choosing.

Deeper, more fruitful relationships for everyone could be the result.

But while most life sciences businesses have made great strides identifying the need for these new capabilities in their organizations, the transformation is very much a work in progress, as our new research reveals.

The survey of 392 senior pharma and biotech executives in Europe, Asia and The Americas reveals that most life sciences companies' focus on specialty care players is still far from providing the customer experience (CX) they aspire to.

This paper explores the survey findings and interviews a range of leaders who are addressing the issues it covers and share insights into how their organizations are responding.

It will explore how pharma is developing the ability to see digital as a native approach rather than as an alternative to face-to-face engagement, whether in extracting richer insights from the wealth of data it commands, to enabling the changes needed to realize the goal of a unified, omnichannel customer ecosystem.

In this paper you will learn:

- While specialty care life sciences teams have achieved much in building omnichannel capabilities, crucial gaps remain
- In many cases life sciences teams still struggle to understand HCP needs but some are mapping customer insights with great effect having built sustainable systems to capture this information
- The ability to orchestrate customer engagement, including dynamically repurposed content across channels, remains a work in progress held back by legacy approaches to business processes, digital adoption, organizational siloes and resistant leadership mindsets
- Capturing and mining the resulting data from engagement in a coherent and automated way is very much still nascent but some pioneers are making good progress in this reinvention
- Existing and future skills gaps need to be addressed as technology and relationships with the specialty care ecosystem evolve and pharma's plans to fill these gaps change with it

Introduction

Creating better experiences is an aspiration shared by many in pharma given that the benefits to all involved – patients, HCPs, payers and pharma itself – are widely understood and accepted.

But specialty care clinicians have unique needs that cannot now be met by the pre-pandemic approaches to engagement alone.

As our research shows, most pharma leaders understand both their shortcomings and the opportunity that lies in redirecting investments to harness the full potential of digital in optimizing the CX in the specialty care space.

They are racing to get to grips with the new approaches, tactics, technologies and mindsets needed to succeed in the digital-first (or even digital-only) setting they and their customers now exist.



How Covid has impacted specialty care customers

While most of the world seems to be over the worst of the pandemic and its restrictions, specialty HCPs are now dealing with its tragic sequel.

“It has been devastating for patients with cancer, with masses of delayed diagnosis and treatment,” says Indranil Bagchi, Senior Vice President and Worldwide Head, Value and Access at Novartis Oncology. “There is a deluge now of patients showing up with stage three or four cancers that would have been stage one or two and with fewer care options.”

In such circumstances, oncology and other specialty care providers look more than ever for timely answers, says Bagchi. “This has emerged as critical. Physicians don’t have time to give access to salespeople to have a conversation. They want just-in-time conversations, mainly medical or key-account driven. The sales approach is still important but reduced significantly.”

The close relationships that pharma enjoyed pre-pandemic with specialty HCPs were upended by months of lockdowns, with the initial enthusiastic shift to virtual engagement with sales teams often providing a poor solution to the real problems HCPs needed help with.

Physicians’ initial lack of technical capability — such as not being able to use a virtual meeting platform — as well as internet or server issues created a frustrating and poor customer experience, says Daniel Johnson, Head of Business Operations, GI/Neurosurgery, Takeda.

Now the challenge is to develop relationships and serve up content that meets HCP needs in an often digital-first context, says Johnson. “We have to make sure that, when we do engage digitally, the content and value created is increasingly higher because we don’t have the ability to build relationships in the same way as face to face.”

The impact has been, and continues to be, far reaching for pharma, says Bagchi. “Information has to be targeted. Physicians are telling us the science is evolving so fast that any interaction has to be focused, customized and has to help them make the right decision at the right time.”

Insights into treatment guidelines is an especially important need now, to help HCPs evaluate initial treatments, then secondary and combination therapies for those that don’t respond initially, he adds. “As the complexity of care continually increases with new drugs and protocols, HCPs are overwhelmed with the huge volumes of data. Companies have to provide information at HCPs’ fingertips thereby enabling operational efficiencies that support care improvements.”

This adds a layer of complexity in specialties where disease presentations are already myriad and rarely have a single treatment option, further increasing the need for collaboration

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“We’ve seen a real uptick in companies looking to redirect investment into building true omnichannel capabilities that benefit all their customer-focused teams, and of course, their customers and the patient.”

Chris Wade, AVP Strategic Solutions at Exeevo

across multidisciplinary teams to best determine the optimal pathway for each patient.

Specialists are increasingly using digital technologies to build their own disease and expertise networks to share insights and ask questions, often internationally.

These networks have in part been enabled via companies such as Medscape, Sermo and M3 and professional bodies such as ASCO and ESR. They have also proliferated as peer-to-peer tools have made it easier to find and form connections and use these to pose questions or share expertise, often in real-time.

Clearly then, the pandemic needs to be recognized as the long-anticipated tipping point toward digital-first approaches for HCPs as well as for pharma companies, most of whom had not previously moved beyond piloting tools that were often still rep-centric in their conception or use.

Chris Wade, AVP Strategic Solutions at Exeevo has experienced this first hand.

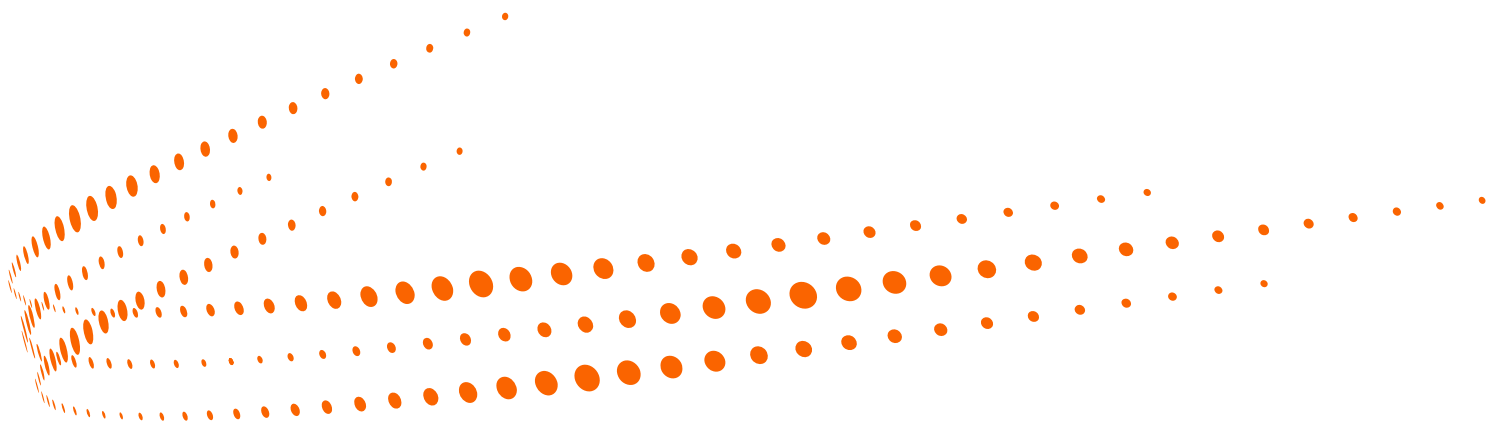
“We’ve seen a real uptick in companies looking to redirect investment into building true omnichannel capabilities that benefit all of their customer-focused teams, and of course their customers and their patients” he explains. “This is a marked shift from the pre-pandemic model where the focus was on multichannel options for reps to

trigger or engage through. This shift sits alongside the clear intention to change how commercial teams are resourced, as seen by recent announcements of reductions in field force numbers.”

He continues, “in parallel to this, these same companies are also investing in their patient infrastructure so services can be best designed and aligned to work in concert with HCP programs.”

Despite this race to develop a highly personalized CX, our survey reveals that many pharma organizations remain on a steep learning curve and still struggle to provide the customer experience for specialty customers they aspire to.

Much work remains to be done.



How pharma is addressing the CX challenge in specialty care

Omnichannel engagement is a priority

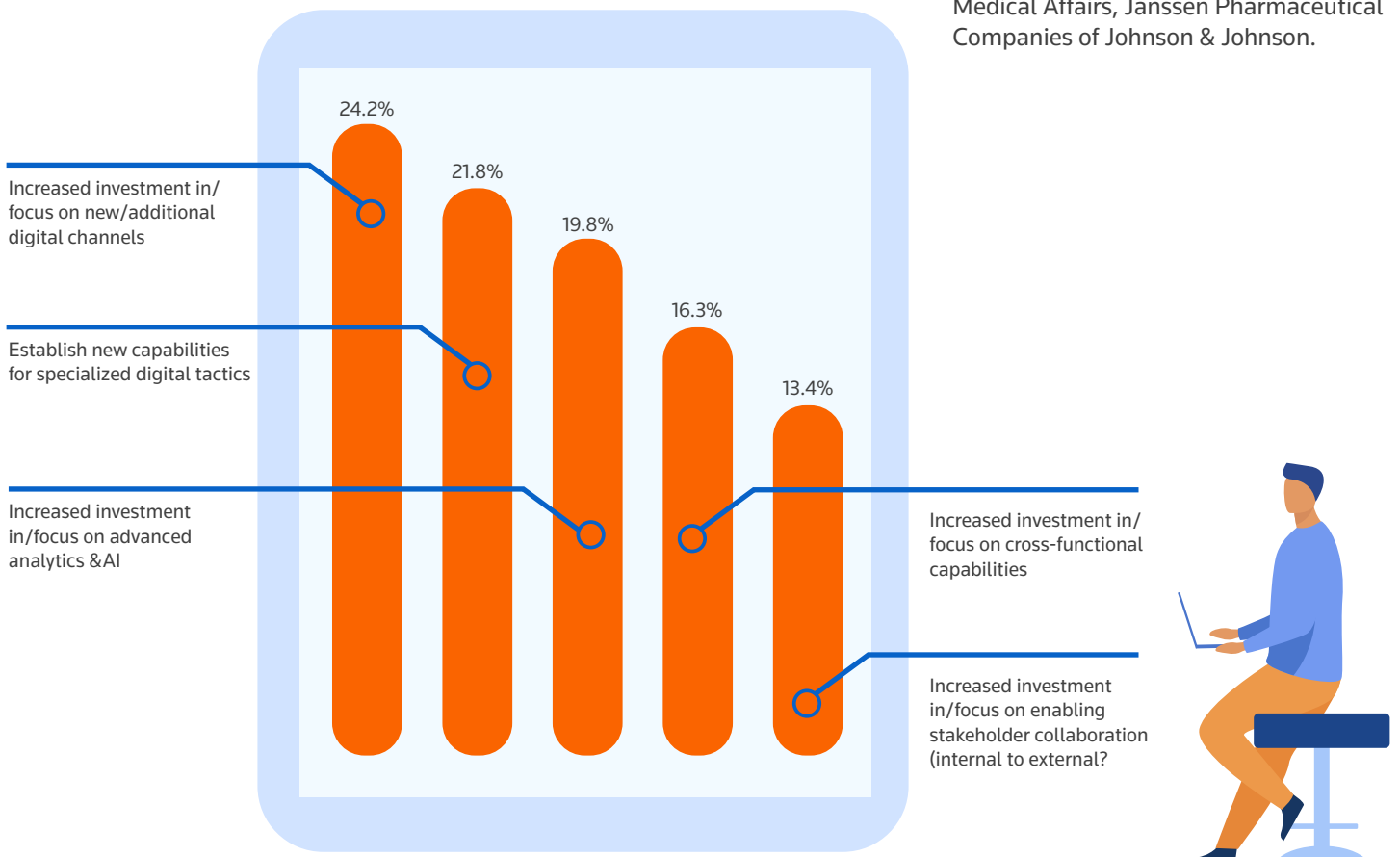
Healthcare’s ongoing digital transformation continues to compel pharma organizations to change their engagement strategies. In our survey, 24.2% of responses identified increased investment and/or focus on new, additional digital channels as a key means of improving the CX.

Moreover, the majority of survey respondents stated that the closer focus on new or additional digital channels will help them better orchestrate the customer journey.

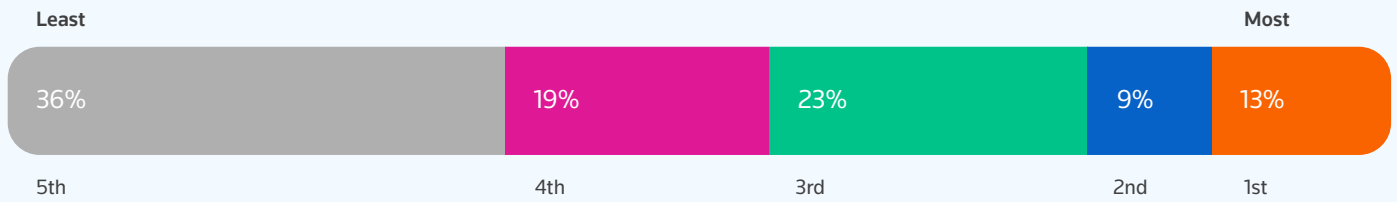
There is now a clear desire to evolve the range of digital capabilities and bring them together to deliver an omnichannel approach to all parts of oncology, says Bagchi. “Our whole effort on next generation engagement is around omnichannel, reaching out to physicians on multiple platforms in a customized way. It’s almost like a flow chart based on need. Can you adapt and give the next batch of information?”

Janssen’s oncology medical affairs function is in the midst of reinventing itself for “full-spectrum” engagement across social media, medical information websites and call centres, says Luca Dezzani, Vice President, US Oncology Medical Affairs, Janssen Pharmaceutical Companies of Johnson & Johnson.

Q15. How is your organization working to create better customer experiences in care? (Select all that apply)



Q12. Personalized digital interactions for each HCP, ranked from least (5th) to most (1st) addressed aspect of CX



Personalizing digital interactions isn't being addressed with enough urgency

One of the key characteristics of digital engagement that we've all come to expect is personalization. Without this, pharma can't meet the complex needs of specialty care clinicians and even risks alienating them by bombarding them with high volumes of undifferentiated messaging.

One of the most striking findings in our survey was the contrast between the acknowledged lack of personalization capabilities and the awareness of their importance, despite the long-standing emphasis on relationship building across sales and field medical teams.

More than a third (36%) ranked it as their least addressed aspect.

But the sector is learning and moving on from the sub-optimal initial reaction to pandemic restrictions, which was to try to recreate in-person tactics, which ended up being impersonal and often landed poorly with HCPs, says Susana Martinez Castro, BU Director of Gynecology, Urology & Gastrology, Ferring. "In 2020, many organizations did massive web conferences that were very long, and one size fits all."

There is now a recognition that content needs to be customized for each customer and adapted into different formats for a variety of use cases, says Martinez Castro. "It requires a lot of flexibility and skills for content creation from the company side."

The talent, expertise, data and insights needed to create an effective digital presence is missing

Life sciences businesses say they struggle to deliver an exceptional CX for specialty care HCPs and hospital stakeholders chiefly owing to a lack of both digital and data expertise but also owing to their limited understanding of stakeholder needs, especially when it comes to HCPs and how decisions made around CRM and other customer systems can result in fragmented processes and frustration. Another important factor holding back progress has been an internal mindset focused on brands (rather than customer need).

Q7. What are the biggest challenges you're faced with, when it comes to designing or delivering an exceptional customer experience for your speciality care HCPs and hospital stakeholders? (Select all that apply)





Disconnected data hinders sound decision making

The limited understanding of customer needs outlined above is as a result of a lack of data or an inability to link and synthesise different sources of data. 12% of survey responses cited a lack of data to help make decisions that can improve the CX for specialty HCPs.

Although data is more accessible than ever, linking data (such as sales data) to the customer journey remains a challenge, says Johnson. “The biggest gap is this data linkage and that’s a pure technical capability.”

Ultimately, the goal is to move away from fragmented channels and messages, says Johnson. “The Holy Grail is being able to, on a granular basis, understand where the customer is at in their perceptions today.

“What messages have they been exposed to? How are those messages delivered through which channel? And then using that insight and the data that’s generated to identify that customer [and know] what exactly should we do in order to move them up towards adoption?”

A lack of insight into HCPs risks worsening their digital fatigue and companies’ competitive edge

Respondents ranked a lack of understanding of the evolving needs of HCPs, together with other stakeholders’ needs highly as problems that prevented them from delivering an exceptional CX for specialty care HCPs and hospital stakeholders.

One result of this lack of understanding as pharma adds more digital channels to its marketing mix is the deluge of

similar messages that HCPs will be subjected to. “It’s overwhelming and undifferentiated,” says Johnson.

Building insights into the kinds of engagement HCPs value is therefore vital, he adds. “The emails that they do open are the ones in which we invite them to an event or congress. We’ve slowly found that the things that provide value are providing the platform for HCP interaction rather than driving promotional messaging.”

“It’s [about] how do we have a more scientific exchange and how do we actually bring together a KOL to have a discussion with us about patient cases?”

“Although data is more accessible than ever, linking data (such as sales data) to the customer journey remains a challenge”

Daniel Johnson, Head of Business Operations, GI & Neurosurgery at Takeda

Mapping customers' needs

Better meeting customers' needs requires a deeper understanding of them by first mapping them.

Janssen is working hard on this task by using MSLs to record HCP preferences, by looking at chatbot data and by examining social media, says Janssen's Dezzani. "It is not easy to do but we will have a clear understanding of who prefers what and what channels are most effective with whom."

"We were able, for example, to map out the universe of HCPs that are actively using social media for professional use. We can understand who the digital opinion leaders are, who is engaging with peers, who uses it passively and who is not using it at all. It's a good starting point to segment the audience and customize your approach."

"That is where I see engagement going to the next level, an order of magnitude improvement. We are not finished, we are on a journey but we have made major progress even compared to two years ago. The old-fashioned way of using the same approach with everyone is going away."

The MSL is a key orchestrator of this whole mapping exercise, adds Dezzani. "No one knows the customer like they do. They help integrate the volume of data created and make informed decisions that benefit and serve our customers."

Pharma must evolve its mindset to thrive in specialty care

One reason pharma struggles to adequately address the specialty customer journey is due to its tendency to continue to apply established commercial and engagement models to the post-pandemic environment.

It has failed to fully accept that the realities of working in a digital-first manner are incompatible with traditional, siloed departmental approaches.

This was abundantly clear in our survey, in which almost 40% of respondents identified the mindset gap as the least addressed aspect of customer service.

Operational silos don't work well in specialty medicine, a complex treatment space that rewards more unified solutions.

Pharma organizations have a key role in helping HCPs access and understand new research into specialty disease

Q13. Relating to the aspect of the customer experience that is least addressed, why is this the case?

Mindset gap

37.5%

Organization is not investing enough to make a difference

15%

Technology gap

13.5%

areas to help optimise treatment for each patient, which also offers them an important means of building effective working relationships.

This puts a lot of emphasis on the non-sales part of the business, particularly medical affairs. There is a growing awareness of the importance of an integrated medical affairs function here.

Without such integration pharma cannot bring its deep expertise in complex diseases fully to bear on the HCP's needs because the rep, KAM or MSL isn't able to connect the discussions that they're having on a particular topic with experts in their own organizations who could directly help.

A mindset gap also applies to the new approaches demanded by digital-first engagement. New data-led approaches are vital now, yet the internal mindset has not caught up, says Johnson, “[It is] a mindset in the marketing and sales team of ‘How do I use data? How do I generate insights? How do I interpret information and use it to my advantage to progress these customers to where I need them?’”

Future investments

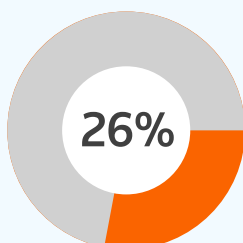
The way to improve the specialty care customer experience is through better use of data management and analytics to drive decision making, by building a better understanding of digital tactics that will help them reach each stakeholder group, and by shifting from a product-focused mindset to a customer-focused mindset.

The chief means of delivering the competitive advantage that survey respondents say they are looking for in investing in new capabilities is the use of AI/ML to improve customer intelligence across their multi/omnichannel programs, along with investment in improved analytics and a broader mix of channels to enable and support customer journeys for true omnichannel capabilities.

This should help create an improved focus on new digital channels, with specialized digital tactics and better insights derived from the great use of advanced analytics and AI.

More than a quarter of respondents (26%) also said they are looking to change their CRMs to fix their specialty CX challenges.

Q20. Are you looking to change CRMs to fix your specialty customer experience challenges?



Q10. Which of the following investments do you think will create the greatest competitive advantage, if applied to your business? (Select all that apply)



Q11. Which of the following investments do you think your organization will make over the next two years, to improve customer experience in specialty care? (Select all that apply)



Q8. Where are the opportunities to improve the experiences your company delivers to its specialty care customers? (HCPs and hospital stakeholders) (Select all that apply)



Transforming CX: The way ahead

The survey reveals a clear desire for better data and tools to go beyond simply reporting and instead to deliver real insights on what HCPs, their patients and organizations need.

The imperative to get up to speed on the digital tactics of engagement is also apparent, along with a recognition that a product focus must give way to a customer focus.

Effective data management strengthens CX decision making

As the survey shows, data management and analytics are seen as key to improving engagement.

However, with so much data available — including through evidence generation and third-party vendors —organizing this data and knowing which data to use and when is a challenge, says Samer Ansari, Head of Data, Digital and Technology - Vice President, Takeda Oncology.

“Data management is critical. [With] all the data coming in, there’s a lot of organizational capability you need to structure the data, model the data, and then have the business rules consistently applied on the data to give us the insights and analytics that we look for.”

This takes discipline, organizational change and consistency, he adds.

In the end, revamping data management can really move the needle for pharma organizations who are seeking to support specialists and, most importantly, patients.

According to Ansari, “because the data is becoming so abundant and rich, it can really move the business and decisions, [accelerating] our vision to improve patient outcomes. So, it has taken centre stage in terms of strategic priority.”

“It’s not a side hustle anymore. It’s a core mission that we believe in but if you don’t have the data management [and] organizational discipline behind it, it’s kind of like flying blind.”

A holistic view of the market is necessary to engage meaningfully with stakeholders

Better use of digital tactics is high on the list when it comes to how pharma can engage with each stakeholder group more meaningfully.

“You have many different types of customers (e.g. HCPs, patients, payers, even governments in many countries),

but they’re all customers. They’re also deeply interdependent; to behave as if they aren’t risks being tremendously ineffective in delivering impactful commercial tactics” says Chris Wade, AVP Strategic Solutions at Omnichannel CRM provider Exeevo.

He adds “we see at a fundamental level, customers being duplicated across multiple commercial functions and R&D. [For instance,] the HCP, who is involved as an investigator, is a prescriber and potentially also a speaker or KOL.”

Fragmented processes can lead to suboptimal outcomes. According to Wade, the lack of an integrated approach that a unified platform delivers makes it so much harder to work effectively with customers who often have very time critical requirements. He says, “it creates enormous friction and wastes opportunities [for pharma organizations] to engage better, educate more effectively, and direct resources and services that best address unmet needs.”

He asserts that companies need to take-down the barriers between different customer groups if they are to successfully move to an experience-focused approach. Overall, as pharma organizations manage the rise of data collection to improve CX decision

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making, they will need to evolve from traditional, disconnected models of engagement.

Wade emphasizes, “it all leans towards a model where if you want to optimize your customer approach, you need to have a complete view of your market, not just one that reflects what only one role sees. If you are purely basing [the market] on one perspective, you can’t avoid bias when it comes to designing new approaches that will support your experience program.”

Connected content is king

One of the most significant demands in the evolution to a better CX is meeting the new omnichannel content needs, which have to be adapted to a range of user experiences and needs.

“Every single channel has or requires different kinds of content,” says Dezzani. “You cannot use the same content

[across] Twitter, Zoom, virtual booths or medical information websites. All those channels have specific requirements in terms of the specific content you want to deliver.”

A further opportunity Janssen sees is linking related content between those channels, says Dezzani. “If I see something relevant as a customer, say a small piece of educational content tailored to what Twitter does best, if I want to dig deep and learn more, I need to be able to find a link to take me to another channel that has a more expansive overview.

“We need to make sure those channels are connected in a seamless way so as a user you can go deeper or less deep. In the past, we were doing multichannel but without the interconnections between each channel. Now we are starting to connect those dots.”

Ultimately the aim is a series of processes that interlink with seamless

handoffs, connections and data exchange between channels. Properly harnessed, data will become an engine for a wealth of insights, says Dezzani. “You get a lot of data organically by people using your omnichannel offering which will create a feedback loop.”

It creates the possibility to strengthen engagement by employing algorithms that suggest relevant and related content as opposed to manually analysing CX based on what they like and don’t like. Such an approach would be very much in the manner of modern platforms such as TikTok, Dezzani adds.

“It feeds you a stream of content that gets more and more tailored to your needs as it learns what you watch and skip. It may be possible to ‘TikTokify’ medical education in this sense. The possibility to make our content more customized to the particular needs, interests and education gaps of HCPs or patients is an extremely compelling one, if a little aspirational at the moment.”

New digital technologies can help bridge the gap between oncology customers and pharma

Pharma will need to address the unique challenges that are impacting oncologists, including the post-pandemic crisis in diagnosis and treatment.

During the pandemic, many patients avoided seeing their physicians and neglected early symptoms, which led to reduced diagnostic rates as well as delayed treatment*.

Similarly, oncologists themselves no longer had access to the teams of reps and MSLS who pharma had invested heavily in over many years to offer their assistance in helping optimize treatment decisions.

Help with the aftermath is now a matter of urgency, says Andrija Tomovic, Oncology General Manager, Bulgaria and North Macedonia, at Novartis. “Diagnosis and treatment initiation is still not fully recovered from the pandemic.”

Chris Wade, AVP Strategic Solutions at Omnichannel CRM provider Exeevo highlights the greater focus on education that is now required. “This is where pharma has a valuable opportunity to make a difference by helping oncologists look for signals from collected patient data, which could indicate the presence of unusual symptoms.”

He continues, saying “that’s an area where data analytics and artificial intelligence can be incredibly valuable. It’s about working with partners who have strengths in bringing an unbiased perspective on what’s driving decision making for that tumor type, organization or even individual oncologist, and bringing them together with platform providers able to route this intelligence to HCPs as they need it to better support their patients.”

*<https://www.pwc.com/gx/en/industries/pharmaceuticals-life-sciences/publications/pharma-oncology.html>

The future specialty care CX

It is clear the future is digital first. Personalization and hybrid MSL/HCP interactions are key pillars of engagement. Adapting to these factors is a clear priority.

“There is a big group of HCPs that likes rapid access to MSLs,” says Dezzani. “Just jumping on a Zoom call rather than waiting for the MSL to fly and get appointments is a big advantage.”

“I’m not saying virtual engagements will replace completely the in-person ones - it is very much around segmenting our audience and making sure we understand who prefers what channels and making sure we try as much as possible to respect their preferences.”

Janssen is never going back to a one-size-fits-all approach to engaging with specialty care providers. “We are trying to develop a personalized communication and engagement approach that aligns with the preferences of that particular physician or stakeholder,” says Dezzani.

Hybrid engagement will most likely become the new norm, agrees Tomovic at Novartis. But pharma organizations will need to rethink how to implement it effectively to improve the customer experience.

He cautions pharma organizations from planning ‘inside out’, or focusing on what they want rather than listening to the needs of their stakeholders. Rather, he proposes that they think ‘outside in’, starting with determining who are the key stakeholders and what are their needs.

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“[It’s important to] analyze quickly what kind of needs we are trying to meet and whether a particular need could be actually addressed face to face or with a digital channel and then you design your omnichannel [approach] following that.”

Ansari adds that Takeda has been very intentional about its approach to blending the physical and digital aspects of engagement.

“We still believe that our reps have that trust and a human-to-human relationship that is important. We will give oncologists a surround sound of the whole digital experience. [For instance,] they can go to our websites, get very tailored emails, and [receive] apps. Depending on customer preferences, we will have a channel strategy, accordingly.”

But, he notes, “At the end of the day, the innovation is there to empower and enable the reps as well. So, whenever they’re engaging their customers,

they are assisted with data and digital solutions that tell them which customer wants what type of content at what time because that’s the mindset, which is more of an empowerment and acceleration of our reps versus a replacement [of the rep].”

Some in-person engagement will remain. Certain aspects of face-to-face engagement are hard to replace, such as cultivating relationships with new KOLs, says Vaibhav Katkade, MD, PhD, Medical Therapeutic Area Lead Global at Pfizer.

“A coffee or dinner helps break that ice a bit more and develop a deeper professional relationship. Forming new relationships is harder in a digital context. If you are planning a four-hour, in-person meeting with someone you usually have time before or after to interact with them one on one to build rapport.”

The need for speed and an agile approach

Tomovic also notes that pharma can no longer afford to spend several months planning new digital strategies and many more months executing them. To become more flexible and agile, the industry needs to adopt an ‘act, learn, and adapt’ mindset. This means being prepared to operate with a degree of uncertainty and a willingness to experiment.

“Things are not so black and white. Sometimes you will be puzzled as to whether something is really suitable for digital. You give it a try, learn, fail, and then you learn to adapt. Or you try to learn why it works better than expected and build further.”

New digital capabilities offer richer and longer-lasting ways to connect

High on the list of priorities for survey respondents is their intention to establish new capabilities for specialized digital tactics. One of these tactics, according to Martinez Castro at Ferring, includes pursuing multiple engagement touchpoints.

“We had a virtual event [with] almost 1500 physicians registered from 20 different countries. The sales rep is going to have the opportunity to discuss the event with those who attended. And for those who didn’t attend, ask them to watch the on-demand version and then discuss.

“With a single tactic, we will have a lot of points of contact with the physician, and we’ll be able to pass on our messages several times. That’s success for me — to be able to assemble everything and maximize the customer experience, giving them what they want, whenever they want it.”

AI can help drive insights and improve CX faster

The third most frequently cited action to improve the CX cited in the survey was investment in advanced analytics and AI.

AI can be used to drive a deeper understanding of customer needs and can help in the process of personalizing engagement in ways that reflect the unique needs of each prescriber, treatment team or organization.

Janssen’s approach here is using it to enhance rather than replace human insights and capabilities, says Dezzani. “It is not ready to replace medical directors or MSLS and AI won’t replace the manual work we do to digest unstructured data, but if you use and leverage AI for what AI is good at - large volumes of structured data - you are really going to unleash an amazing potential.

“AI is very good at finding signals and patterns in large amounts of data that would be too time consuming for humans to analyze. We can then feed those signals to medical affairs professionals that they can take and act on to translate into actionable strategy.”

When it comes to embracing these new tools, Dezzani’s advice to others would be taking it step by step. “My encouragement to anyone starting to explore their tech mix is whatever your bar is, take it down a notch. Use it for what it does best and use a trusted vendor partner who knows AI, who can do the coding and the tech component. Look to partner and grow with them in this journey.”

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The future frontiers of CX

Further out, but perhaps not as far as some might imagine, new channels and technologies will offer even more potent ways to serve customers.

What may seem very much like frontier technologies today may quickly become mainstream. “The next step is adding more channels to this mix. Number one is the metaverse,” says Dezzani.

“Right now, we are only scratching the surface of this in medical affairs. We are only starting in virtual reality (VR) but at the same time 50% of HCPs are now millennials and Gen Z is entering the workforce, all of them digital natives and used to connecting through social media.

“The metaverse can connect many of these dots to pull together the best of in person and virtual interactions. VR technology can now make it seem very close to having a live meeting.”

Another example is Web 3.0 which may find its place in the mix and it will become important to cultivate familiarity with that internally, says Dezzani. “As we speak, we don’t have many people in medical affairs that are proficient with all these different technologies.

“But two years ago, no one was proficient with social listening. It is now an established practice, and everyone knows the basics of some kind of social listening activity. The same needs to happen in some of these other areas.”

Evolving relationships

The relationship between pharma and specialty care providers is also evolving. Conversations are increasingly ranging more widely, beyond classic HCP clinical information exchange and encompassing topics including securing reimbursement for precision medicines and companion diagnostics, as well as healthcare system strengthening, especially so in rare disease.

Re-treatment diagnostics and next-generation testing will become bigger part of the conversation between medical affairs and healthcare, says Bagchi. These conversations will increasingly be with key account management, payers and budget holders requiring new approaches to serving them, he adds.

Conclusion

The more rapid adoption of digital tools that enable deeper channel orchestration, tailored customer interactions and remote and asynchronous engagement represents a huge opportunity for specialty care pharma.

By mastering this new layer of engagement capabilities on top of existing approaches there is enormous scope to build on the already close and intertwined relationships between HCPs, pharma and other stakeholders.

These tools promise to disseminate new knowledge even more effectively, foster new collaborations, form new relationships and make existing ones deeper and more fruitful.

This new future is not just about serving unmet needs. It is also about acting on new data insights to anticipate and serve new and emerging ones. "It's about how you can be more agile and responsive not just to need but also opportunity," says Chris Wade, AVP Strategic Solutions at Omnichannel CRM provider Exeevo.

We can expect conversations ultimately to become pre-emptive, exploring new possibilities in care, adds Novartis' Bagchi. "In future, we will ask 'what is your unmet need?' and then look into our medicine chest to see if we have a match."

It is clear that the relationships within specialty care are evolving. The direction of travel is towards more strategic approaches that address disease in new ways, demanding new approaches to serving customers.



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The aim of the pharmaceutical division at Reuters Events is to make pharma more open and valued. More open so that the strongest ideas and insights are brought to the fore in a transparent, trustworthy manner. More valued by having an authentic approach to building products and services that matter to patients.

To do this, Reuters Events provides a hub for senior-level pharma executives, patient groups and other health stakeholders to exchange ideas and observe shifting trends and practices. We actively respond to the aims and interests of our audience, so please get in touch.

About Exeevo



Exeevo and its platforms are the result of a strategic alliance established between Indegene and Microsoft in 2017. We have grown from providing a customer experience (CX) platform for commercial and medical teams to supporting the entire journey from clinical to commercial for life sciences organizations to deliver superior experiences to both healthcare teams and patients.

Exeevo is a unified, intelligent and agile digital ecosystem for life sciences organizations to revolutionize customer experiences for healthcare teams and patients in their journey towards sustainable health outcomes. Built on the Microsoft Cloud, Exeevo leverages Azure, Dynamics 365, Power Platform and Teams to deliver next generation, single cloud CRM solutions that support the need for connected engagement across life sciences businesses for commercial customers and patients.

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About Exeevo

Exeevo is a global cloud solutions provider for life sciences companies to improve how they interact with customers across their organization to provide exceptional experiences that drive commercial objectives and improve patients' lives.

The Exeevo Customer Experience platform leverages Microsoft Cloud for Healthcare to provide a true 360° view of all customers and the omnichannel journeys needed to orchestrate their operations, delivering unrivalled value, and future-proofing an organization in a dynamically changing digital world.

Exeevo serves 1,000's of subscribers from pharmaceutical to medical device organizations in over 30 countries. Headquartered in New York, Exeevo has offices in India, Europe, and North America.

Exeevo's unified, agile cloud-based platforms provide an ecosystem of advanced CRM capabilities. They offer marketing, contact centers, event management, commercial operations, expert engagement, clinical trial recruitment, and customer and patient insights for pharmaceutical, biotech, and medical devices as well as all of the traditional field sales and multichannel capabilities provided by your current CRM. Exeevo platforms address these use cases:



CX use cases from engagement to operations with healthcare providers, hospital systems, and pharmacists. This platform exceeds traditional life sciences CRM and marketing alternatives by including omnichannel engagement and AI.



CX use cases from trial to therapy for patients, consumers, and carers. It brings together Microsoft Dynamics 365 and Microsoft Cloud for Healthcare replacing fragmented point solutions.