How to achieve quality engagement in today's non-personal promotion landscape

The changing non-personal promotion landscape

Pharmaceutical brand marketers today face an interesting conundrum: how to maintain their brand's share of voice despite constrained resources and diminishing in-person access to physicians and other healthcare providers (HCPs). Under these constraints, pharma brands have fully embraced non-personal promotion (NPP) and correspondingly increased their digital advertising budgets.¹ Both these trends are expected to continue to rise in the face of rep restrictions.

But are pharma brand marketers maximizing their non-personal digital budgets? This paper will explore some of the challenges facing pharma brand marketers and provide a framework with which to evaluate the efficacy of multi-channel and non-personal campaigns.

Understanding the challenges to maintaining share of voice

Over the past 10 years, the number of HCPs considered to be "accessible" to field sales representatives has fallen by nearly 40 percent² as the healthcare industry has consolidated and physicians have traded private practice for employment by medical groups or health systems.³ This pattern has usurped prescribing authority from HCPs and relegated formulary decisions to central purchasing organizations. This environment has forced pharma brand marketers to turn more and more to NPP channels to reach these difficult to reach clinicians, and marketing dollars spent in these channels are expected to grow by 35 percent to \$3.8 billion over the next four years.⁴

But despite the promise that these digital channels have shown in consumer-facing industries, physicians' and other clinicians' attention continues to be difficult to capture: 40 percent of U.S. HCPs have opted out or unsubscribed from professional emails,⁵ and nearly 90 percent used or are interested in using ad-blocking software on their smartphones.⁵ Perhaps it's due to the fact that over half of U.S. clinicians don't have the time to manage the deluge of information they receive from patients, medical journals, and other sources,⁶ or perhaps it's because the information they receive is becoming more and more repetitious (65 percent of physicians report seeing recycled messaging during in-person representative visits.⁷). And EHRs have not been a panacea in enabling pharma brand managers to reach their HCPs with timely information, given how frequently

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these clinicians navigate away from them due to the technology's inadequacy in answering simple prescribing questions.

The Need - Today's NPP Goals

Despite the challenge of navigating competitive, crowded marketing landscapes, non-personal promotion fills an active void left by constrained in-person access. We recommend pursuing these goals within NPP strategies:

- Broader customer coverage: expansion of the white space beyond a set of prescribing customers previously identified to include supportive care
- 2. Higher contact frequencies: facilitation of consistent presence and SOV maintenance
- Optimization of customer needs: content journey personalization based on HCP preferences
- 4. Cost-efficiency: evidence that behavior has been influenced, with proven returns on investment
- Stronger understanding of digital influence: evaluate brand's KOL digital footprint and access

With increased digital contact, however, is there a risk of message fatigue within a targeted audience? Proper planning and in-depth analysis tailored for a specific brand can be used to limit potential risk and may increase overall ROI.

A stepwise approach to break through the noise

The first step to an effective multi-channel campaign should be for the brand to define its **objectives**. Are you launching a new drug or new indication? Are you trying to blunt a competitor's launch, or announcing a change in formulary tier? The brand and corporate strategy should help to dictate the messaging strategy.

Next, building a thorough understanding of your prescribers, whether at the segment, decile or as an individual writer, is critical. Once we understand their points of influence, routine drivers and content engagement strategies, distribution of key messages becomes that much easier.

Third, consider the array of **channels** on which clinicians transact. What are clinicians using this channel for — to look for drug information at the point of care or to immerse themselves in the science behind a new formulation or indication? Such consideration



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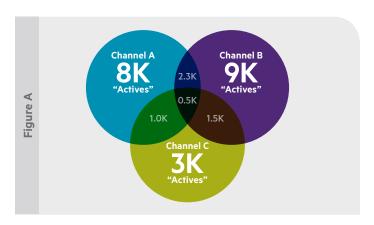
helps to identify the type of information the clinician would like to receive over that channel.

Finally, determine your **definition of success.** Are you trying merely to increase name recognition of a new brand, or are you trying to protect market share of a mature brand? Success will look different depending on the brand's goal, the tactics employed, and the channel chosen. Through all of this, it's important to be sympathetic to clinicians and their content preferences and message fatigue; proper synchronization of messages across channels can help ensure that clinicians don't tire of your message.

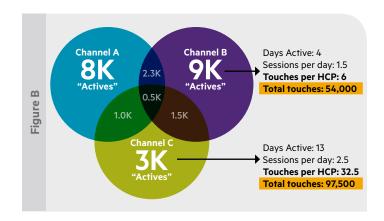
Looking beyond list matches to understand true engagement

With all of the options out there, how should you evaluate the channels comprising your multichannel campaigns? Rarely is a simple list-match a good indicator of future success. Rather, you should consider how active and engaged clinicians are on a particular medium, as these criteria are more likely to be predictive of the trust that they have in the information they'll receive there.

Online, email, social networking, and mobile platforms all evaluate the engagement of their HCPs differently. Some may use an active count as a proxy for engagement but define active users differently. Some may define an active user as one who is simply registered with the site or app, and others may define an active user as one who has logged in during the trailing 12 months.



Defining active counts across platforms is a challenge, as seen in in Figure A (which depicts a hypothetical example). The number of potential touchpoints (based on HCP engagement) may vary widely based on how a channel defines their active users. Accordingly, an effective way to compare platforms is to ensure similar parameters are measured for each (e.g., number of sessions, days active in a month).



Using comparable definitions of the "active" HCP can help estimate the number of touches within a given period, as seen in Figure B. When clinicians trust the material they receive from a particular channel, it may be more likely to influence their decisions and drive business results for your brand. These are the criteria that lead to quality engagement with HCPs in a particular channel and that help to drive deeper digital relationships with your brand.

Quality digital engagement is possible in today's NPP landscape if channels within a similar medium are assessed consistently.

Seizing the opportunity of a new planning season

As media planners and brand managers begin to plan for '20 campaigns, there is a tremendous opportunity to:

- Reassess the reach of each channel based on HCP activity.
- Evaluate tactics that give the right message to the right physician at the right time.
- Retrospectively review the level of influence that previous campaigns were meant to have — and consider how to optimize those programs to see stronger ROI.
- Synchronize activities across channels to ensure information is disseminated in a timely manner.
- Take user experience into account (i.e., depth of content immersion).

Digital initiatives provide powerful data. Ask the channels you are evaluating to demonstrate how engaged their audience is. True transparency will be a strong predictor of meeting or even exceeding your KPIs.

Contact EpocPR@athenahealth.com to learn more about Epocrates and how we can help you meet your marketing objectives. Planning a non-personal campaign and have questions? Reach out to Underscore Marketing for a consultation at info@underscoremarketing.com.

^{1.} Dobow, Larry, "Marketers Trend Report 2018." Medical Marketing & Media https://www.mmm-online.com/home/channel/features/marketers-trend-report-2018-relief-after-one-year-of-trump-doesnt-mitigate-all-concerns/

^{2.} Sturgis, Malcolm. 2018. "Doctors to Pharma: 'Let's Get Personalized." ZS https://www.zs.com/-/media/pdfs/affinity-monitor-2017-study.pdf?la=en.

^{3.} ZS. 2015. "For Pharma Reps, a Challenging Market for Physician Access Gets Even Tougher." https://www.zs.com/-/media/files/publications/public/ph-mar-wp-access-monitor-exec-summ-f-web.pdf?la=en. 4. Orsini, Patricia. 2017. "US Healthcare and Pharma Industry Stat Pack 2017: Digital Ad Spending Forecast and Trends." eMarketer. https://www.emarketer.com/content/us-healthcare-and-pharma-industry-

^{5.} Manhattan Research. "Taking the Pulse®" 2018

^{6.} Manhattan Research. "Taking the Pulse®" 2017

^{7.} Manhattan Research. "ePharma Physician®" 2017-2018