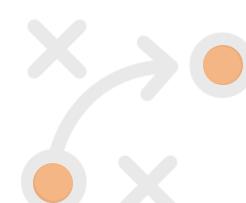




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INTRODUCTION



INTRODUCTION

Digitisation has been a disruptive force in many industries, and it will continue to disrupt the omnichannel ecosystem with rapidly proliferating channels and customer engagement models. Maximising the potential of digital represents huge opportunities for the pharmaceutical industry.

Best-in-class omnichannel customer engagement (OCE) strategy helps cross-functional teams deliver a seamless and integrated experience across multiple communication channels.

While digital teams are increasingly well integrated with the business and IT, only 8% of pharma staff indicated that there was a robust process to help the team define the right channel mix.

(Across Health Maturometer 2019)

Instead of starting with an integrated OCE strategy, many companies develop channel "strategies" (e.g. a website strategy, an app strategy, etc.) or are cruising from pilot to pilot, without full implementations - very often disconnected from the brand's strategic imperatives. This makes it impossible to leverage the full potential of omnichannel customer engagement.

A robust OCE strategy design process starts with customer, company and brand insights, translates the business objectives and ideally also assesses organisational digital maturity.

"Tactics before strategy" or going for "the new shiny object" are approaches which have not helped pharmaceutical companies in the past, leading to high levels of dissatisfaction both with customers and pharma staff alike.

Omnichannel can no longer be a nice pilot project driven by a small team. Instead, this must serve as a solid foundation to build a fully integrated, more customer-centric journey.

This document serves as guidance to formulate the OCE strategy:

- Understand two types of digital strategy
- Learn the guiding principles of an OCE strategy formulation and methodology
- Identify pitfalls in the OCE strategy
- Recognise key considerations for a successful OCE strategy





Two perspectives on digital strategy

There are two types of digital strategy: company-wide (digital transformation) and brand/therapeutic area (omnichannel brand/TA strategy). Historically, there has been much less interest in, and budget for, a company-wide digital transformation. As a result, company-wide efforts have been rather limited, leading to the digital "beginner" status.

Focus of this playbook **COMPANY-WIDE** DIGITAL **OMNICHANNEL** TRANSFORMATION STRATEGY **BRAND/THERAPEUTIC AREA (TA) STRATEGY** Develop "ENABLERS" for digital transformation **INTEGRATE** digital/omnichannel into the mix "Fix the mix" "Transform the organisation" How do we develop a digital What are the key processes. strategy and organise for digital SOPs and technologies transformation and success? to invest in? What's the budget for digital? PEOPLE, **PROCESSES & ORGANISATION TECHNOLOGY** & CULTURE **CHANNEL MFASURFMENT** INTEGRATION Senior management becomes more aware of the opportunities of digital as well as of the risks of being How do we best integrate How do we measure our left behind. The relatively new trend of "health-tech" is channels to maximise customer progress towards becoming engagement and impact? a customer-centric omnichannel also helping to create momentum for the companyorganisation? wide digital transformation strategy.



Getting started - understanding the omnichannel ecosystem

The omnichannel ecosystem delivers a seamless and integrated experience across multiple channels, from the first touchpoint to the last one. Customers receive information where, when, and how they want it. Channels are fully integrated and complement each other, while delivering a unified message across channels and creating a signature customer experience.

Why is omnichannel engagement strategy important?

The key promise of omnichannel is to drive higher customer satisfaction and accelerate brand adoption and thus more impact. Ultimately, omnichannel strategy triggers a paradigm shift, urging phamacos to move from a product-centric to a customer-centric engagement approach.

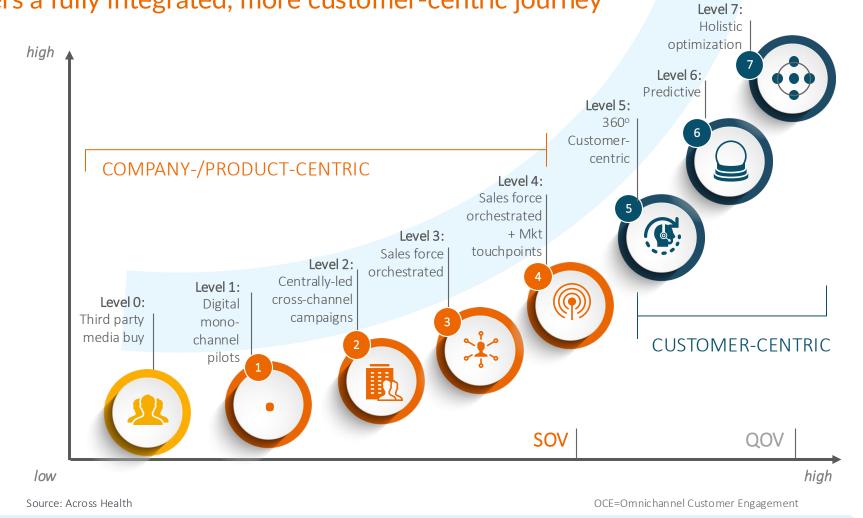
How and When do you use omnichannel strategy?

An omnichannel engagement strategy can be formulated in each lifecycle stage of a brand or across portfolio. While many pharma companies are looking at how to drive performance at launch and during the growth phase, companies are also seeking to further optimise the OCE strategy at the time of loss of exclusivity (LOE), often with limited support from infield resources.



FROM OMNICHANNEL ECOSYSTEM TO DIGITAL STRATEGY

Single channel has been traditionally driven by F2F, while omnichannel offers a fully integrated, more customer-centric journey



DATA & TECHNOLOGY



OMNICHANNEL ENGAGEMENT STRATEGY FORMULATION

OCE strategy development: a structured and proven 6-step approach

In this section, we focus on the OCE strategy formulation process that is an evidenced- and experience-based framework. The following 6 steps are a good starting point. The first three steps are related to brand strategy and only as of step four we move to channel selection.



Developing your omnichannel strategy - Strategic imperatives

Step 1 "Strategic imperatives" is a crucial step in OCE strategy formulation. This will subsequently play a key role in translating the strategy into actionable customer engagement, while considering prioritised engagement objectives.



STRATEGIC IMPERATIVES

Your brand strategy:

- Brand objectives
- Positioning
- Business opportunities
- Key stakeholders & segments

- What are the **brand objectives**?
 - How are these prioritised for your brand/market?
 - What is their impact on stakeholder selection?
- What is your brand positioning versus the competitors?
- Where do the biggest business opportunities and challenges lie?
- Which **customer groups** are key?
- How do you segment customers?
 - What are other stakeholder group(s) you could consider (e.g.referrers, nurses, pharmacists, patients, payers, etc.)?
- What are your **engagement objectives** for focused customers (physician patient) considering market specifics and your **strategic imperatives**?



OCE planning starts with insight gathering to help you formulate the omnichannel strategy

ILLUSTRATIVE Non-exhaustive

Market & strategy questions

What is the size of the market and respective sales & market shares of the relevant brands?

What are key opportunities and issues for your product(s) along the patient journey and why?

What are the key business opportunities & challenges for the brand? Increasing reach, adding frequency, adding rep impact, connecting peers?

Do you see opportunities to reach non-traditional stakeholders?

Sales & marketing questions

Which specialist type(s) is/are the main prescriber? Any important referrer groups?

What is the total size of the target audience in your market? (universe vs. target)?

How do you segment your target audience? What is the size of the respective segments?

What would be your desired number of calls per HCP for each of the segments?

Internal insights

- Brand strategy, incl. tactical plan
- Promotional investments & target audience
- Digital maturity (omnichannel infrastructure)

Medical questions

Which other medical channels do you currently use (congresses, local meetings, journals, ...)?

Any experience or plans in terms of digital (webinars, congress coverage, digital health, ...)?

How is the competition using these channels?

Budget & resources questions

What budget is available for the execution of the strategy?

How ready is your MLR team to add digital channels in terms of approval timelines?

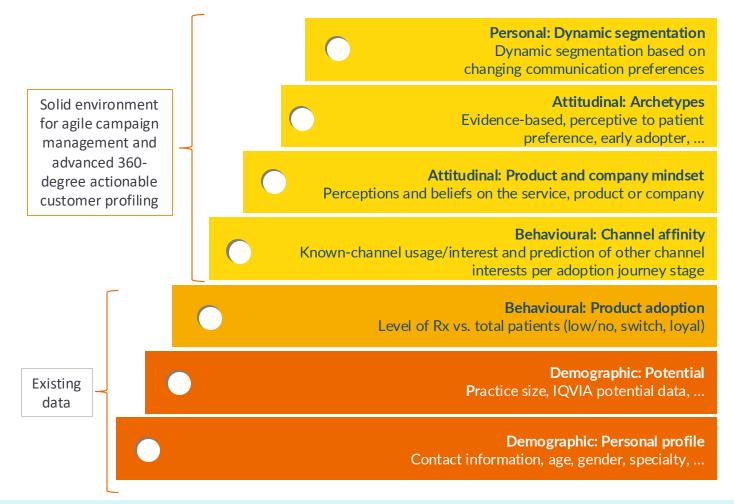
When would you consider the omnichannel campaign to be successful for your brand?

External insights

- Competitive environment and benchmarking
- HCP insights (external market research) communication preferences, digital affinity – (Navigator research)
- Latest trends, social media listening, digital technology impact etc..



Dynamic segmentation – start gathering customer insights today to help you personalise your omnichannel engagement



Define key customer segments - the HCP archetypes

Other attributes of physicians that could be considered to help you add personalisation of messages and content in order to drive behavioural change.



McKinsey archetypes



INDEPENDENTS

- Do not place much value on interactions with pharmaceutical companies
- Rely on evidence-based materials
- Tend to be slower to try new medication



TRANSACTIONALS

- Only value samples from pharmaceutical companies
- Cost Conscious
- Most receptive to patient's preferences
- Tend to be slower to try new medication



KNOWLEDGE SEEKERS

- Interested in educational programmes offered by pharmaceutical companies
- Do not value informal talks or samples
- Least receptive to patient's preferences
- Tend to be early adopters and pro-pharma



RELATIONSHIP SEEKERS

- Look forward to interactions with reps and pharmaceutical companies, and other clinicians
- Value samples and education from pharmaceutical companies
- Tend to be earlier adopters of new medication

Source: Evidence-based multichannel Across Health, 2019, McKinsey archetype segmentation model

Developing your omnichannel strategy - Strategic proxies

How do we define the behavioural objectives for each identified segment?



STRATEGIC PROXIES

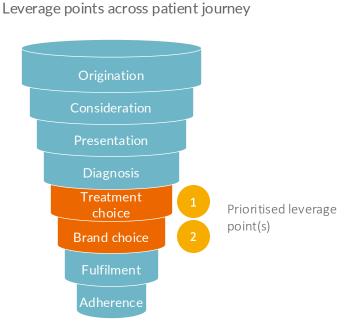
Translate the strategy into something actionable

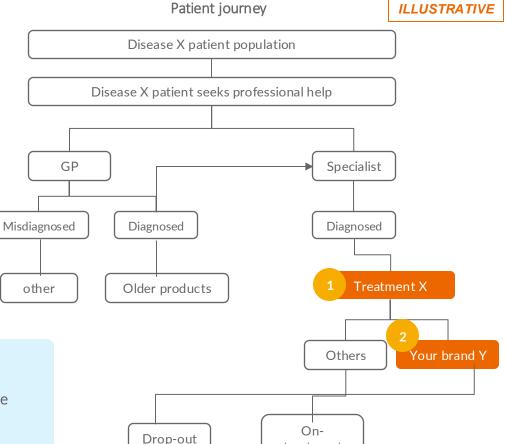
Leverage points Behavioural objectives Messages In this step, the strategy becomes more tangible. This step could be summarised below:

- A. Identify, select your leverage points.
- B. Identify current and intended **behaviour/beliefs** to define behavioural change objective(s) per prioritised segment(s).
- C. Define key messages that are associated with your behavioural change objectives. Sequence these messages in line with your engagement objectives.
- D. Define the omnichannel ambition based on your engagement objectives i.e. contact frequency that you would require to generate impact and to drive behavioural change.

Step2A: Identify, select your leverage points





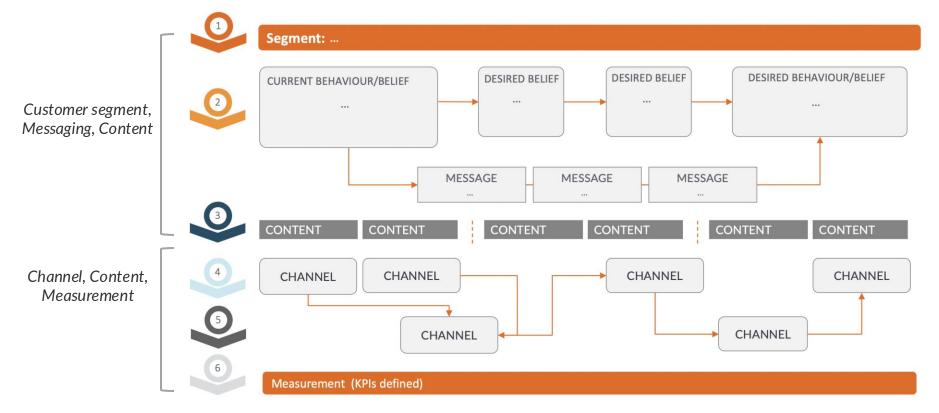


treatment

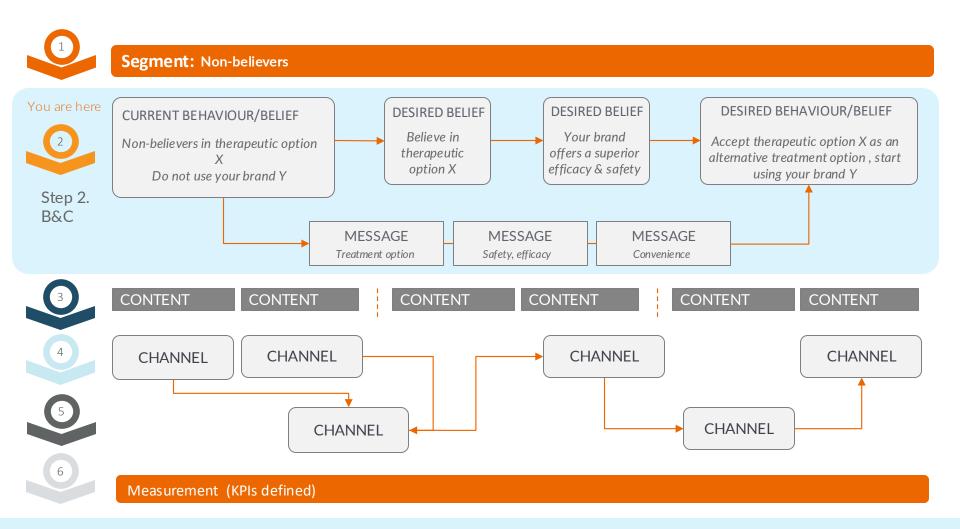
- How will it impact the target physicians and patients short-, mid- and long-term?
- How will it support the strategic imperatives and help outcome of patients?
- How will competitors potentially benefit from these?

Guiding principles – Strategy first, channels next

As a next step, we apply the following strategic framework and our proven methodology. Firstly, you will start with an OCE strategy formulation (select customer segment, define messages to drive behavioral change objectives and link these messages to content. For the second part of the OCE strategy, you will identify the optimal channel mix and select and prioritise content/channels to create an integrated customer journey over time. Finally, for each omnichannel program, KPIs and metrics need to be defined up-front at the different levels: campaign, customer and channel.



Step 2B&C: Create the behavioural change journey and messaging per segment



Step 2B&C: Identify current and intended behaviour/beliefs and behavioural change objectives. Define key messages that are associated with your behavioural change objectives

Segment: Non-believers

Current behavior

Distinct behavior:

- What does the doctor in this segment do?
- What does the doctor in this segment say?

Current attitude

Distinct attitude, beliefs:

- · What does the doctor in this segment know?
- What does the doctor in this segment believe in?
- What is their underlying attitude driving their current behavior?

Journey messages What messages in what order will help you to move your doctor from current to desired behavior

MESSAGE 1

Therapeutic option X offers superior outcomes compared to other treatments

MESSAGE 2

The brand Y offers superior efficacy compared to other brands

MESSAGE 3

The brand Y's safety is comparable to the standard of care

MESSAGE 4

The brand Y helps you and patients with convenient, a simple treatment

Desired attitude

Distinct attitude, beliefs:

- What does the doctor in this segment need to know?
- What does the doctor in this segment need to believe in?
- What should their underlying attitude be driving their new behavior?

Desired behavior

Distinct behavior:

- What will the doctor in this segment do?
- What will the doctor in this segment say?



Step 2D: Define the omnichannel ambition based on your engagement objectives

Your omnichannel ambition in MCQs

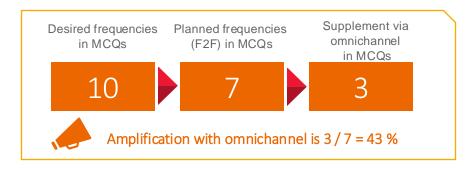
Selected engagement objective

Increase the number of HCP interactions for segment X to drive adoption of product Y

Your ambition



We define the desired number of contact frequency = number of interactions that will help you move the needle. If your desired frequency is an equivalent of 10 face-to-face interactions or MCQs, and we only have planned 7 face-to-face rep interactions, we could supplement with OCE interactions that have a total value of 3 MCQs.





For further details on the MCQ concept, please see Section 3, Step 4 of this playbook

As of step 2 your strategy becomes more tangible. We will deep-dive into conversion points (step 3) and content to achieve conversion in line with your omnichannel ambition.

Developing your omnichannel strategy - Conversion points

Which content items and services are needed to convey messages and achieve your engagement objectives and drive change?



CONVERSION **POINTS**

Content & services to drive desired action/change

In this step, you will need to define the messages, services and content to achieve conversion. The following questions could be considered:

- How do you achieve conversion? For example, which content items and services are needed to achieve the behavioural objectives and convey your messages?
- How could we bring our value proposition messages tailored to our customers (i.e. prescribers)?
 - 1. The **brand journey** tailors promotional information to the HCP's fields of interest.
 - 2. The knowledge journey provides medical information.
 - 3. The customer relationship journey facilitates getting in contact with HCPs.

Best practice examples of "value providers" take into consideration 3 key elements:

1) Promotional information

→ The brand journey

E.g. webcast suggestions and product information according to treatment preferences.

2) Medical information

→ The knowledge journey

E.a. congress suggestions and medical courses according to knowledge preferences.

3) Personal information

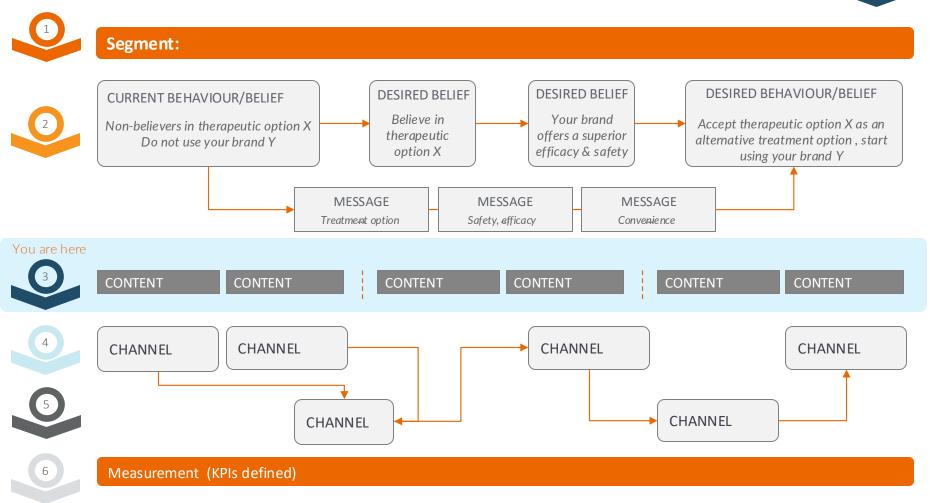
→ The customer relationship journey

E.g. shared files, contact info, personalized agenda.

Some services and content may already exist and be available centrally, while others may need to be newly developed locally.











Connect messages with content & assets to support these to drive the behavioural change journey

Segment: Non-believers

ILLUSTRATIVE

Current behavior/beliefs

Distinct behavior/beliefs:

- Non-believers in the rapeutic option X
- Do not use your brand Y

Customer messages are tailored per customer segment to drive behavioural change

Desired behavior/beliefs

Distinct behavior/beliefs:

• Accept the rapeutic option X as an alternative treatment option

Journey messages What messages in what order will help you to move your doctor from current to desired behavior

MESSAGE 1

Therapeutic option X offers superior outcomes compared to other treatments

MESSAGE 2

The brand Y offers superior efficacy compared to other brands

MESSAGE 3

The brand Y's safety is comparable to the standard of care

MESSAGE 4

The brand Y helps you and patients with convenient and simple treatment

Content and services What content/services help us convey these messages? How do these drive faster HCPs conversion?













For each customer segment, behavioural change objectives and key messages have been identified. In this step, we connect these messages to different types of content/services to convey these messages with a value proposition. This should be repeated for every segment to match content, customer need and message.



Before you move to channel selection, you need to define how to bring about successful conversion.

- It is very likely that there is already content which speaks to most topics you may want to bring to the attention of customers.
- Once you have established the behavioural change journey you would like the different attitudinal segments to follow, you need to match different messages to each behavioural change objective.
- This is the key message which needs to be communicated and aligns to the different type of content which that segment will find most compelling. This should be repeated for every segment to match content, interest and message.
- Do not think in terms of channels here, but about the kind of information HCPs would need to affirm or refute their beliefs.



The example above illustrates that a pivotal paper can be divided into different content building blocks. For each topic, different building blocks can be chosen, depending on: pre-interaction, post-interaction, channel preference of HCP, level of knowledge of HCP, previous information given to HCPs.



Repurpose existing content to accelerate speed-to-market.

By reusing already available content and distributing it via different channels, you can save effort, time and budget and reach a new audience

Developing your omnichannel strategy - Tactics

Which tactics/channels do you select? Which channels are available to drive your objectives?





TACTICS

What are ideal channels to achieve this?

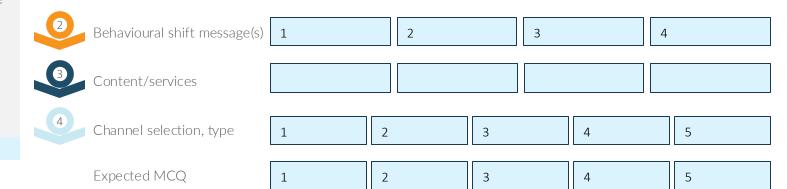
In this step, the relevant channels will be identified, based on reach, impact, cost and estimated frequency.

- All of this should be fully aligned with the customer journey.
- The channels are typically defined during a brainstorming session, supported by customer insights, such as the Navigator research.



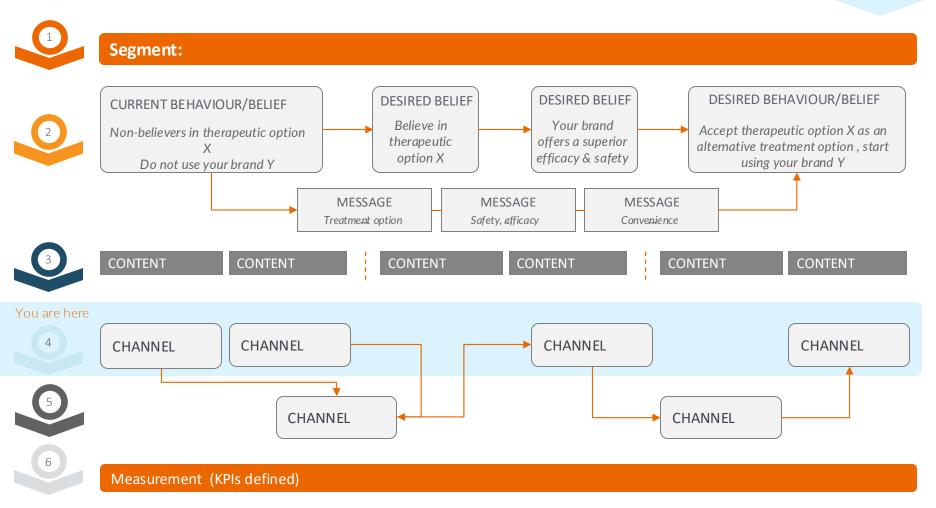
Channel preference and mix decision

- Regarding treatment decision-making, which channels should be used, based on HCP/stakeholder preference and impact?
- How to leverage the external data to define an evidence-based engagement flow?





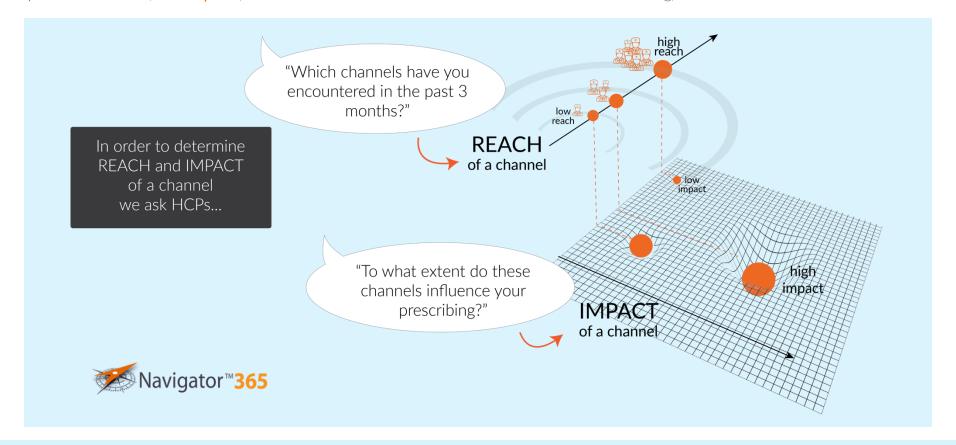
Step 4 : Select tactics/channels





Selection of appropriate channels (mix) for the target audience, channel mix, frequency and budget for the campaign

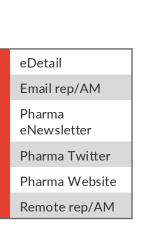
NavigatorTM market research covers both reach (the extent to which channels are commonly encountered with your stakeholders) and impact (the extent to which channels influence clinical decision making).

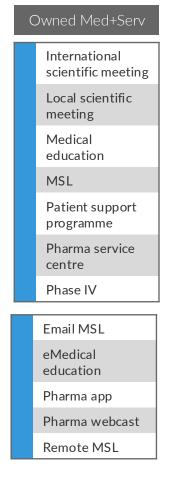


Over 50 channels are covered by the unparalleled Navigator™ research



Owned Promo >50 Pharma call Channels Covered Pharma DM/newsletter Rep/AM Sample Offline









Search engine

NEW

Multi-channel equivalent (MCQ)



- The measured impact is recalibrated according to the level of impact of the sales representative or MSL.
- This multichannel equivalent (MCQ) model is a powerful tool to make selection across the >50 channels that HCP's are using on a regular basis.
- To compare the channels to each other, we measure the impact as a "multi-channel equivalent" (MCQ) which is a unique value recalibrated from one sales rep or MSL equivalent (1 MCQ = impact value of 1 face-to-face interaction).









as single common measure



Multi-channel equivalent (MCQ)

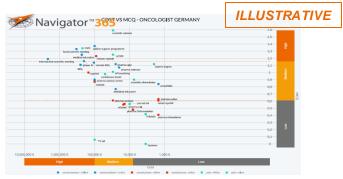
The MCQ enables comparisons between the relative impact of various channels to the rep or MSL.



Select the right channel mix and calculate according to your campaign ambition - these will be translated into MCQs

Some key considerations to select your channels for the optimal channel mix:

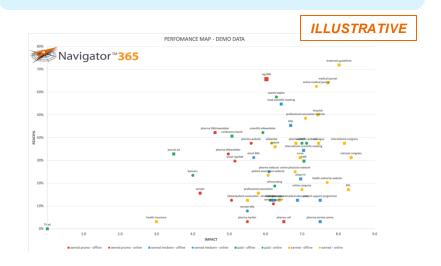
- Which channels (traditional and digital) are reaching customers and how impactful are they?
- What is the right balance between promotional and medical educational channels?
- What is the right balance in using digital with HCPs, patients and payers?
- Seek to use a variety of owned, paid and earned channels (reach, frequency, MCQs)



Next, by looking at the planned channels, the planned frequency for each channel, and the expected reach and impact score in MCQ, you can calculate the additional MCQ value for your campaign.

Tips

- Ensure a balanced mix of high-frequency channels (e.g. email, banner) with low-frequency, higher impact channels (e.g. rep, webinar) to deliver against campaign ambition (step 2)
- Cost effectiveness of selected channels (cost per MCQ): compare the channels cost (fixed + variable) and the impact of these channels (MCQs)



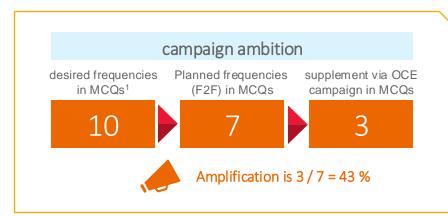
Set your omnichannel campaign ambition





campaign ambition in MCQs

- What is the desired number of contact frequency = number of interactions that will help you move the needle?
- If your desired frequency is an equivalent of 10 face-to-face interactions or MCQs, and we only have planned 7 face-to-face rep interactions, we could supplement with OCE interactions that have a total value of 3 MCQs.





campaign validation in MCQs

- In order to validate the campaign ambition, we look at the planned channels i.e. the frequency, reach and MCQ enough to meet the campaign ambition.
- The example below shows that the campaign expectation is <u>3.59</u>
 <u>MCQs</u> for a selected customer segment, which is enough to meet
 our campaign ambition set in the step 2 (<u>3 MCQ</u>).





Developing your omnichannel strategy – Prioritisation and planning

How do we link the content/channels into a journey over time? How do we prioritise channels?



PRIORITY SETTING & PLANNING

How feasible and impactful are the tactics?

• Prioritise and plan channels over time

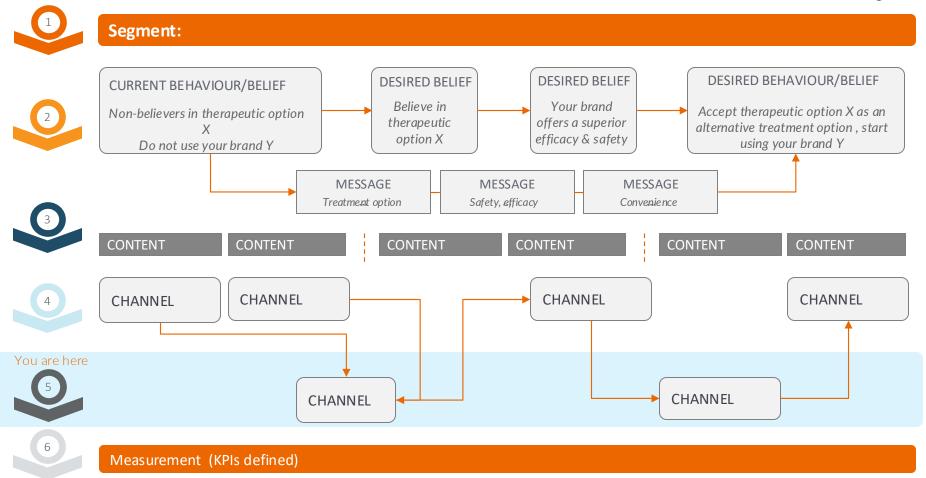
As of this step, certain channels will be deprioritised based on the internal maturity and readiness of your organisation:

- Is your organisation ready to activate a channel with agility?
- How do we prioritise channels to reduce complexity and cost and optimise resource utilisation?
- What are the key roadblocks for OCE campaign implementation e.g. technology platforms, resources to execute the campaign strategy, capability for execution, regulatory and compliance considerations, etc.

- A. Prioritise your channels using two dimensions (effectiveness and feasibility).
- B. Design your omnichannel campaign plan
 - 1) Vary your channels with a right mix of owned, paid and earned channels
 - 2) Ensure that the right content in the right format in the right context are offered to maximise the impact
 - 3) Design a target frequency with a balanced mix of high-frequency channels with low-impact and with low-frequency, high-impact ones (e.g. webinar)
 - 4) Consider cost-effectiveness (cost per MCQ)
 - 5) Integrate personal and non-personal channels (F2F only, digital only and mixed)









Omnichannel-engagement strategic objectives serve as a guiding principle to identify relevant tactics and channels



What can you do to increase the # of HCP interactions?

What can you do to get in touch with no-see HCPs?

How can you empower reps and MSLs to make a F2F visit more impactful? What can you do to connect HCPs?

Engagement objective

ADD FREQUENCY TO **FACE-TO-FACE VISITS**



Most common channels

- 3rd party enewsletter
- 3rd party website
- Call centre
- DM
- Fmail
- Emeded
- HCP self-service portal
- MSL email
- Pharma app
- Remote MSL
- Remote rep
- Rep email
- Webcast / webinar

INCREASE REACH

- 3rd party enewsletter
- 3rd party website
- Call centre
- DM
- **Email**
- Emeded
- HCP self-service portal
- Pharma app
- Remote MSL
- Remote rep
- Search marketing
- Webcast / webinar

ADD IMPACT TO FACE-TO-FACE VISITS

- HCP self-service portal
- MSL email
- Remote MSL
- Remote rep
- Rep email
- Tablet support



PEER-TO-PEER COMMUNICATION

- HCP network
- Online scientific meeting
- Virtual advisory board
- (KOL) webcast / webinar

tactics

Leverage cost-effective channels and increase frequency (e.g. rep email, direct mail. call centre)

Reach out to no-see customers (no-access, limited geographic access, etc.) with channels like eNewsletters (owned, 3rd party). 3rd party websites

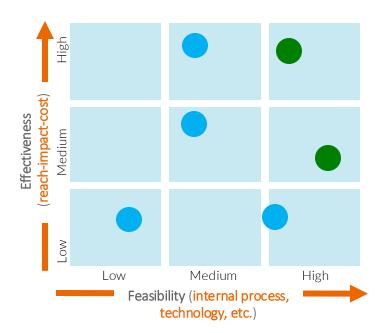
Augment impact of fiedforce visits (e.g. email with personalised content. tablet detailing)

Helping HCPs connect to each other and endorse kev messages via peer-to-peer meetings, webinars, HCP communities, etc.



Prioritise your channels

Following steps 1-4, we will prioritise channels and plan over time.



In this step, we will map our digital opportunities based on Feasibility and Effectiveness.

- Feasibility: to what extent can this be realised within the company, considering budget, culture, headcount, technology and other types of constraints
- Effectiveness: what is the potential business impact of this tactic?

For example,

- The Y axis: effectiveness of channels could be defined using the external framework and insights for example Navigator data (reach, impact, cost per MCQ)
- The X axis: feasibility to deploy channels could be defined considering deployment of channels in the company, integration of channels with existing technologies and hurdles to deploy new channels (e.g. change management, compliance process to consider)

Cost per MCQ

- Some channels with a high fixed cost are less suitable for small target audiences.
- Cost/MCQ is a good measure to create an efficient mix.











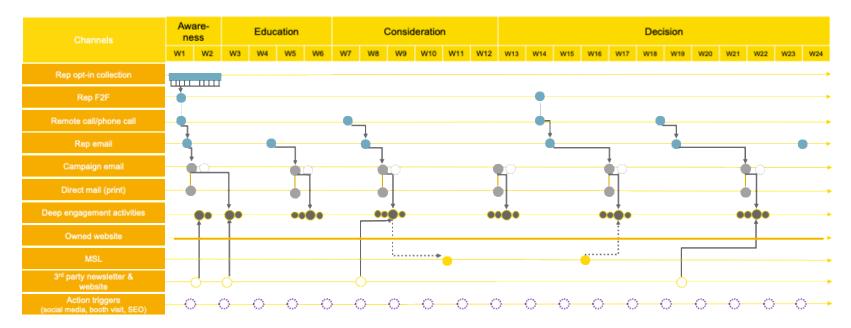
REACH

IMPACT

FIXED AND VARIABLE COSTS

Connecting the dots and bringing them together: link content to channels and create a holistic OCE blueprint





- The touchpoint journey (TPJ) describes the planned OCE interactions over time throughout the HCP's journey. It defines the channels, channel frequency & sequence, and dependencies of these interactions.
- This example "micro-journey" flow illustrates when the engagement starts and how to communicate with a selected customer segment, using a KOL webinar as "communication hook".
- Touchpoint journeys never end, there is always a next interaction planned, unless the HCP decides to opt-out.



Developing your omnichannel strategy - Measurement

The 2x2 matrix below gives an overview of what to measure in four quadrants. We see KPIs which can be measured directly in the channel in combination with KPIs measured indirect on the brand.



MEASUREMENT

How can we measure the interactions and engagement?

- KPI definition
- Measurement framework

Communication effects (qualitative / indirect)

Behavioral effects (quantitative / direct)

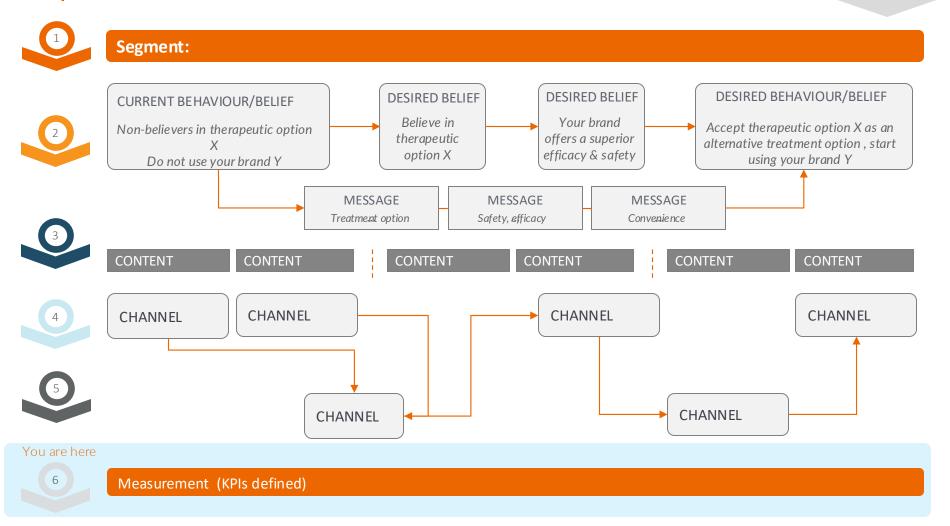


A good set of KPIs includes quantitative and qualitative measurements.

- Reach and Effectiveness (the bottom two) are quantitative KPIs. They are based on actual customer behaviour.
- 2. Engagement and Conversion (the top two) are qualitative or indirect. They are based on customer perception or input.

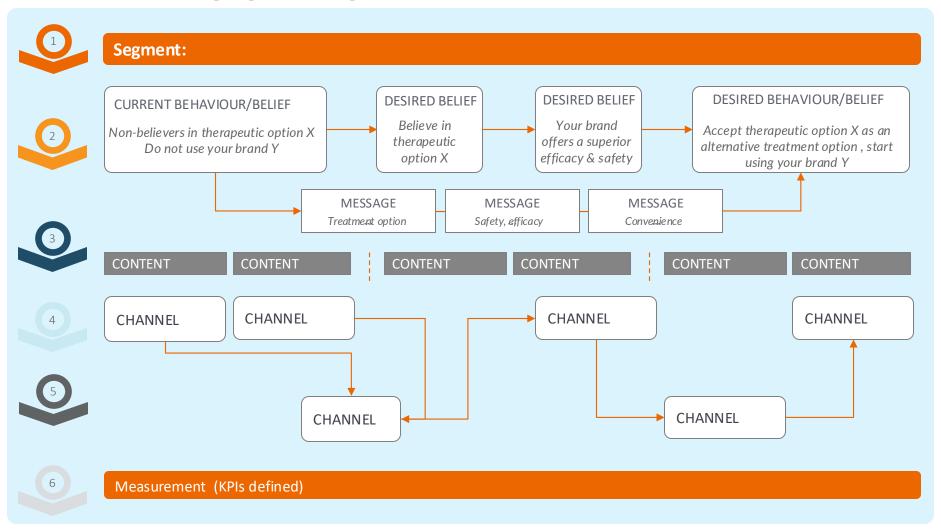


Step 6: Measurement





Conclusion: Bringing it all together



Some common pitfalls need to be taken into consideration for your omnichannel strategy

	Common pitfalls	Description of pitfalls
1	Believing multichannel is 'digital only'	Omnichannel is not per se about adding digital channels to the mix. Some offline channels continue to thrive and should be considered too.
2	Thinking digital is only a playground	Many still tend to see digital as a playground, or simply a way to spend the remaining budget. A failure to see digital as a strategic investment will lead to overall failure.
3	Equating digital with innovation	Equating digital with innovation is a common pitfall. In The New Normal, digital is a commodity, and factors like reach, engagement, cost and customer data precede innovation.
4	Placing digital in isolation	The strongest impact is achieved when all channels are activated along the customer journey in a well-orchestrated way. This also includes the integration of online/offline channels.
5	Seeing digital only a way to enhance field force engagement	While digital has a clear role in enhancing such interactions, it is missing potential benefits of the internet to engage a broader pool of stakeholders, like nurses and pharmacists. These new audiences can be reached in a cost-effective way.
6	Substituting face-to-face with digital	Digital is seen as a substitute for face-to-face. However, in many cases, it is a very cost-effective way to amplify the fieldforce engagement and create a signature

customer engagement.

Key considerations for a successful OCE strategy

- 1. How well do you understand the channels your customers are using?
- 2. How aware are you about the reach, impact and cost of each channel?
- 3. How well do you understand the competitive landscape?
- 4. Have you looked beyond your traditional customer groups? Did you explore 'transformational' opportunities (e.g. patients, pharmacists)?
- 5. Did you take a deeper dive into customer segments and have you developed a customised approach per segment?

- 6. Have you focused on strategy, messages and content first and have you defined channels last? Are you looking to optimise the customer engagement via the customer journey?
- 7. Have you looked at the cost per engagement for new channels vs. traditional ones?
- 8. How well integrated is your customer-facing organisation (sales, marketing, medical, digital) when it comes to distilling insights and providing a seamless experience for customers?
- 9. What to do with the knowledge once obtained?
- 10. Did you develop a business case and do you measure the impact of each channel throughout your programme vs. the initial business case?



