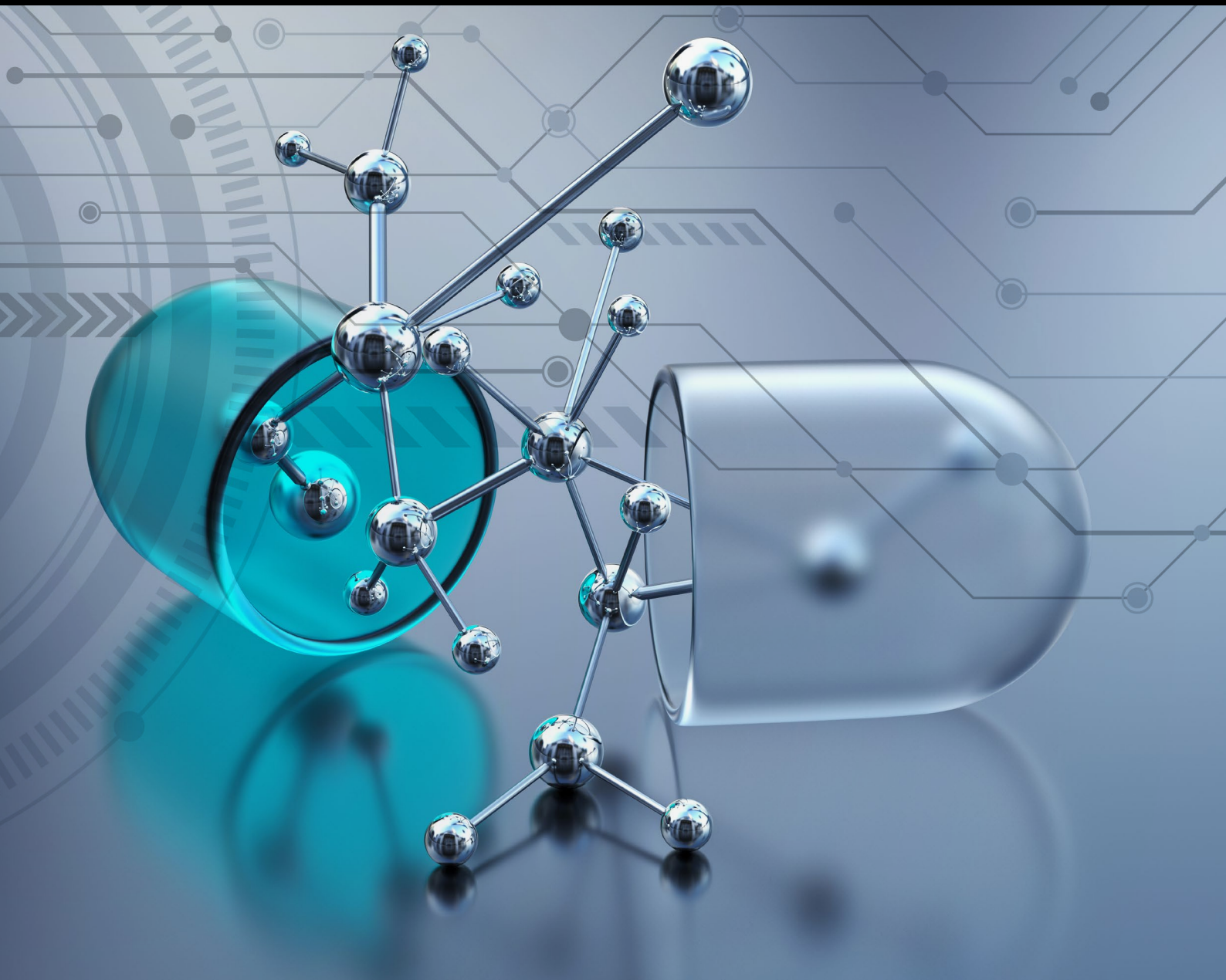


MEDICAL-COMMERCIAL COLLABORATION:

THE EVOLUTION OF A NEW ERA OF DIGITAL ENGAGEMENT



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Executive summary

With the pandemic firmly behind us, the pharmaceutical industry has had a chance to stop reacting and start planning for a transformed healthcare landscape. In our 2021 white paper, “Medical-Commercial: Collaborating to Win in the Digital Era,” more than 1,000 senior life sciences professionals shared their insights and plans for a radically different future than the one envisaged before 2020.¹

The 2021 report found significant interest in leveraging digital technologies to deliver targeted content at scale, although the path forward lacked clarity.

One year on, this follow-up report revisits the challenge of executing on the opportunity to collaborate better to see what changes have taken place and what progress has been made in the past year.

Last year, we found the engagement and content preferences of healthcare professionals (HCPs) to have changed dramatically, and 36% of survey respondents told us that the least-addressed aspect of the digital customer experience within their company was personalized digital interactions for specialty care HCPs.

Industry experts like Eddie G M Power PhD, MBA, GFMD, VP, North America Medical Affairs, Hospital, Pfizer Biopharmaceuticals Group, tell us that the ability to anticipate and serve HCPs’ needs in a hyper-personalized way is still an active goal for many life sciences businesses.

According to Power, reorganizing content creation using a modular approach that cultivates coordination between medical affairs and other stakeholders is proving effective, although managing and curating content remains a challenge industry-wide.

In 2021, our report suggested that deeper collaboration between medical affairs and commercial and marketing functions would play a key role in meeting the need for targeted content and addressing changed engagement preferences.

In 2022, we’ve found that a hybrid model of in-person and digital omnichannel engagement is emerging, but there are significant differences of opinion when it comes to how best to make it work.

Last year, we found the engagement and content preferences of healthcare professionals (HCPs) to have changed dramatically, and 36% of survey respondents told us that the least-addressed aspect of the digital customer experience within their company was personalized digital interactions for specialty care HCPs.

Field forces are being rapidly reshaped, streamlined and refocused. According to Konrad Dobschuetz, speaking as Head of Digital Innovation, Novartis UK, a digital-first approach is now favored by modern HCPs, whilst others say kick-starting any relationship with an in-person visit is essential to gaining traction with digital approaches.

This year, we have also found that field forces – despite their reformations – aren't connecting in close mutual support with marketing teams to manage and curate content.

The deeper collaboration between commercial and medical affairs teams that had previously been identified as being essential for on-target content creation is also not evident yet.

Digital exhaustion is an issue everyone needs to consider. Bombarding HCPs with non-personalized content risks the consent that's so critical to digital engagement and competing in a sea of undifferentiated information makes for poor strategy.

Vanity engagement metrics are holding back progress, too. Metrics that emphasize quantity over quality – numbers of views, opens or clicks and content creation or consumption – often promote poor use of digital channels, while metrics that emphasize personal performance can result in excessive activity and risk hard-won consent. Understanding how efficient you are as an organization is essential, but this cannot be taken as a proxy for holistic customer metrics, such as the Net Promoter Score (NPS).

Without addressing these issues, digital investments risk repeating the pre-pandemic errors of expensive tactics and tools that all too often miss the mark.

This year, we've found that the bulk of the transformation needed to leverage digital capabilities and deliver targeted content to HCPs at scale still lies ahead for most companies. These transformations include organizational change, the adoption of new technologies and new approaches to cross-functional teamwork.

In this paper, we explore how pharma can transform the way it serves customers by:

- Orchestrating physical and digital activities across the organization
- Running fewer campaigns and instead trying to meet HCP needs
- Mastering tailored content and working out how best to share it across functions
- Exploiting the potential of digital to help serve all customers, not just key accounts
- Reshaping goals and metrics around how well the customer is served
- Giving medical affairs more say over, or even perhaps ownership of, relationships with HCPs

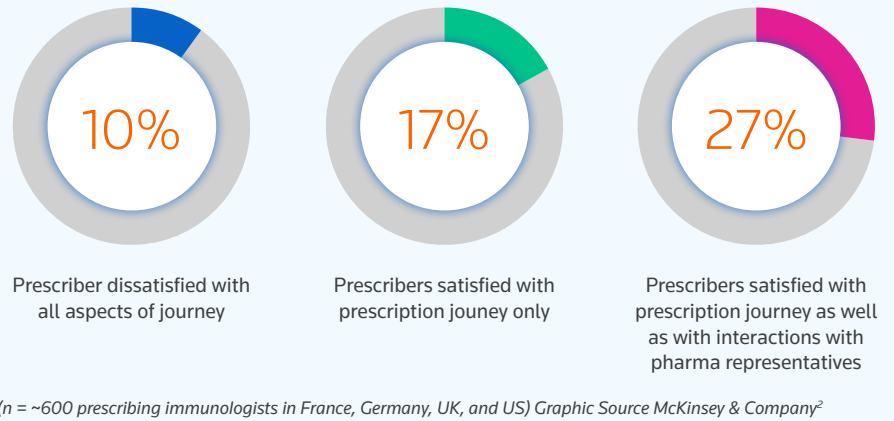
Introduction

In 2021, pharma was, understandably, still in reactive mode. It was racing to serve a range of new HCP needs and scrambling to adapt engagement to a digital-first approach, all this while trying to guess what HCPs would ask of it post-pandemic.

Now, the dust has settled on how well those initial responses to the pandemic worked, and plans for the near future are clearer. However, life sciences businesses are still adapting to the new world of hybrid engagement. The resourcing mix is being carefully considered, along with how to join the dots between channels and teams, but the benefits of improving the customer experience (CX) remain clear.

A number of studies have shown that improving CX can greatly benefit an organization's bottom line. A survey by McKinsey & Company of 600 physicians found that practitioners were twice as likely to prescribe medication after a satisfactory customer journey compared with those who were dissatisfied.² McKinsey's findings are backed up by research conducted by an industry specialist, DT Consulting. Better CX has been shown to increase the belief in an organization's products, as well as enhance the reputation of the company in the customer's eyes. Customers can include patients as well as HCPs. Additionally, improving the dissemination of important medical information and treatments can help companies achieve better health outcomes.³

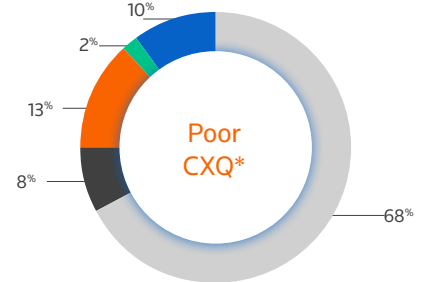
Average likelihood to prescribe vs satisfaction with customer experience, %



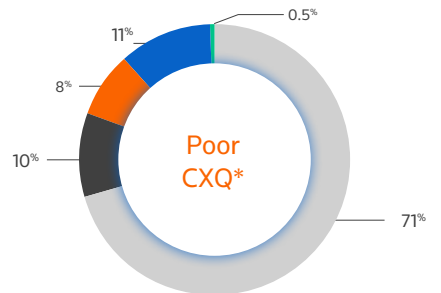
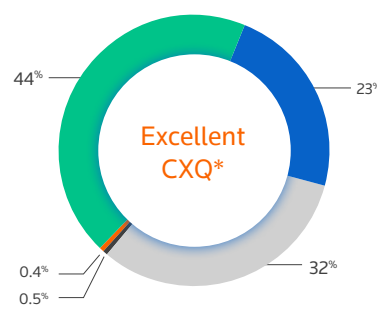
Excellent customer experiences have positive business impact

How did your most recent interaction with a pharmaceutical company affect your view of the following?

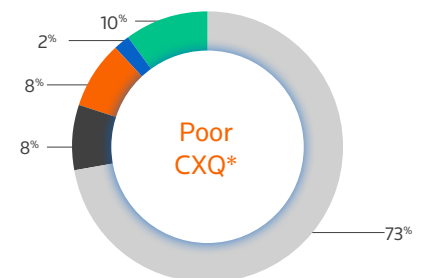
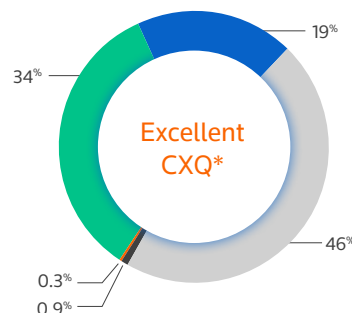
The Image of the Firm



Your belief in one of the Firm's Products



The Firm's Use of Digital Channels



*CXQ = Customer Experience Quotient Graphic Source: DT Consulting / Aptus Health⁴

■ Significant positive change ■ Small positive change ■ Small negative change ■ Significant negative change ■ No change

² From product to customer experience: the new way to launch in pharma - McKinsey & Company (2018)

³ The state of customer experience in the pharmaceutical industry, 2018: HCP interactions - DT Consulting, Aptus Health (2019)

⁴ DT Consulting/ Aptus Health

“Like any good life science experiment, you try a hypothesis, fail and try a new type of model. We will learn as we go”

Eddie G M Power PhD MBA GFMD, VP, North America Medical Affairs, Hospital, Pfizer Biopharmaceuticals Group

But still, the path to achieving excellent customer experiences in a post-pandemic world isn't fully in focus. “At the moment, we are still somewhat in reactive mode, by necessity,” says Eddie G M Power, PhD, MBA, GFMD, VP, North America Medical Affairs, Hospital, Pfizer Biopharmaceuticals Group “It will be an iterative process. Like any good life science experiment, you try a hypothesis, fail and try a new type of model. We will learn as we go.”

Our report last year, in which we surveyed more than 1,000 senior global pharma professionals, explored the industry's plans to adapt to the new engagement paradigm. The report examined the aspirations of commercial and medical to work together in a more transparent, cohesive and cross-

functional manner. The aim: to better serve HCPs and patients in a landscape that's now digital-first. Respondents shared a wealth of insights on the trends and challenges with which they were contending.^{5,6}

At that time, most life sciences companies were rapidly getting to grips with digital tools and adapting fast to virtual approaches in areas such as medical education, congresses and clinical trials. Respondents to our survey predicted the creation of additional channels that would enable, and support coordinated user journeys (such as in-person, hybrid or digital) and advanced analytics to help leverage insights.

The picture that emerged was of an industry that knew where it wanted to go. Most respondents were clear that their longer-term mission was to develop an effectively orchestrated customer experience, and they were aware of the capability gaps they had to close to achieve this mission.

Since that time, the situation has progressed, and this report will revisit how far pharma has come in achieving its customer engagement goals. We interviewed pharma leaders, consultants and industry observers and asked what the industry has achieved in its bid to re-engineer engagement in the post-pandemic era. We also examined how far they still have to go to develop the capabilities they need to provide excellence for customers.

Pharma CX Specialty Care - 2021 Report

Respondents

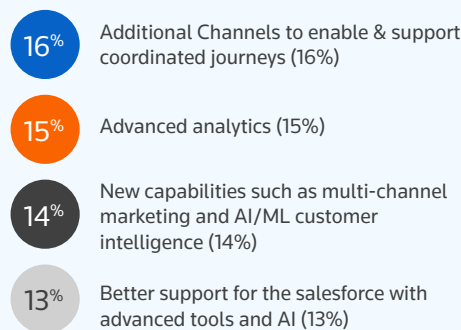
Which function are you most closely aligned with?



Data Source Pharma CX Specialty Care Survey – 2021 Report, Exeevo/ Reuters Events⁶

Investments

Which of the following investments do you think your organization will make over the next 2 years to improve customer experience in specialty care?



Key Finding

“Lack of a holistic approach was the biggest failing relating to digitalized customer experiences, with personalized HCP experiences going largely unaddressed due to a prominent “mindset gap.”

⁵Medical-Commercial Collaborating to Win in the Digital Era – Exeevo, Reuters Events (2021)

⁶Pharma CX Specialty Care Survey – 2021 Report – Exeevo, Reuters Events (2021)

Where are we in 2022?

A customer-led, hybrid omnichannel mix is solidifying as a goal

Last year's survey revealed high demand for digital engagement offerings across the board for sales, marketing and medical affairs, and the demand for digital continues this year, according to the experts interviewed.

Now though, rather than focusing on digital-first or digital-only engagement, the challenge is shifting towards getting the balance right between face-to-face contact and digital omnichannel offerings that offer real, personalized

value at the customer level. This hybrid approach encompasses another key trend from 2021, where we saw that investing in CX was the second most pressing strategic priority.

Which aspect of CX is the least addressed today for your company in the specialty care space?

Personalized digital interactions for each HCP

36%

Aligning with your patient/caregiver stakeholder plans

24%

Face-to-face meeting with specialists by reps or KAMs

24%

Relating to the aspect of the CX that is least addressed, why is this the case?

Mindset gap

38%

Organization not investing enough to make a difference

15%

Technology gap

14%

What has been your organization's biggest digital failing as relates to CX?

Lack of holistic approach to enable best digitalized CX

52%

Over-reliance on traditional in-person engagement activities

20%

Lack of digital platform to enable better patient care and drive opportunities to learn about patient experiences

12%

"There was no face-to-face access during the pandemic, so everyone was talking about remote engagement and rep email as the ultimate solution," says Fonny Schenck, MD, Across Health; EVP, Precision Value & Health. "But actually, the key is finding the right mix of techniques – online and offline, sales, marketing and medical, push and pull – to ensure superior customer engagement."

According to Schenck, there is still a segment of pharma professionals that is thinking that the industry can go back to how things were before 2020, but this is not going to be the case. "Yes, physicians do want to have more face-to-face engagement than during the pandemic – but they want to see a personalized blend of channels, not just the field force.

Data Source Pharma CX Specialty Care Survey – 2021 Report, Exeevo/ Reuters Events⁶

Herein lies the difficulty, according to Schenck. “Finding the right balance of what kind of content through which channels and how often to engage customers is complex. Because if you’re overdoing the frequency or not bringing relevant content in line with their needs, sending an email or inviting people to a webinar won’t help either. Physicians will basically shut you down.”

Developing digital engagement offerings doesn’t mean 100% digital, according to Erasmus Holm, Chief Marketing Officer, MSD Nordics & Baltic’s. “What normally happens, in most businesses, including our industry, is that you go all in on a new approach. They say, ‘Oh, it’s going to be 100% digital engagement,’” says Holm. “It’s the same with a hybrid workplace: ‘Oh, now we got to go 100% virtual, and we don’t need a workplace anymore.’ But in truth, what history has shown us is that the reality most often lies somewhere in the middle.”

Despite being “born of the digital age” and the fact that he was hired by MSD to perform a digital transformation, Holm doesn’t believe everything should be digital but rather a sophisticated mix powered by data insights. “I think there will always be a place for face-to-face interaction as we are social beings,” says Holm, “I think it’s back already; we’ve seen conferences being sold out in some areas and a lot of physical events coming back with a vengeance these days. However, the overall models on how we engage have changed and have become hybrid and rightfully so.”

“Developing digital engagement offerings doesn’t mean 100% digital”

Erasmus Holm, Chief Marketing Officer, MSD Nordics & Baltic’s

Medical’s digital capabilities are improving

Last year, we reported that the importance of customer engagement with medical affairs was a clear trend that was continuing to rise post-pandemic. The 2021 report also revealed pharma’s urgency to respond to the strong preference among HCPs to engage more with medical affairs, to increase Medical Science Liaison (MSL) headcount and to resource the function so it could engage better digitally.

This year, the trend continues, with medical affairs’ digital capabilities catching up fast with those of commercial and marketing, and internal influence is on the rise. For Pfizer, an important part of the process is helping MSLs, and other medical affairs colleagues get comfortable with using all these different channels for effective engagement.

“If a rep is having a conversation with an HCP and they are asked an unsolicited medical question, there’s now the ability to triage that electronically and feed that to our medical experts,” says Pfizer’s Power. “They can have almost a real-time interaction if that is what the HCP so desires. This has made communication much more efficient, integrated and, also, more tailored to what the HCP is looking for.”

Commercial and marketing have come a long way from mass “push” engagement to a more responsive, customer-led “pull” approach that’s long been familiar to medical affairs. However, much remains to be done, including the provision of relatively basic capabilities, in order to capitalize on the insights gained from these more customer-driven engagements.

Data is a core issue

“Pull marketing, like offering an HCP a live chat or a multi-triggered email campaign, is coming along okay,” says Konrad Dobschuetz, speaking as Head of Digital Innovation, Novartis UK, appointed Chief Enterprise Officer of UCL Partners and National Director of the NHS Innovation Accelerator (NIA) in September 2022.

“The biggest issue is data. Keeping customer databases up to date, for example, remains a key challenge. As an industry overall, we are probably 50% there if you compare the sector to the big CRM giants of Amazon or other big companies in the retail sector.”

According to Schenck, the complexity of getting customer centricity right in any organization comes down to a mix of culture along with technology and data. “The focus has traditionally been on technology implementation, but this in itself is not enough. The right mindset and skills, plus 360-degree customer data, are essential for creating true success and competitive advantage. It’s about marketing, sales and medical working together around customers and taking into account what they want, which will, in turn, enable you to continue the conversation.”

Novel approaches are bearing fruit

“We are embracing the hybrid working model, whether that means through our MSLs with personal interactions, other face-to-face meetings or virtual ones.” says Pfizer’s Power. “We are embracing the opportunities that the pandemic accelerated. We are leveraging digital technology in its various forms including self-service content.”

Enabling a range of new asynchronous interactions is working particularly well. This applies to both one-to-one and one-to-many engagements, such as virtual advisory boards that take place over a few days and reflects the reality of an ongoing dialogue with a customer rather than a series of one-way content drops.

Events can now run over days or weeks, saving time and organizational complexity that comes with trying to convene a one-day meeting. “You can start with personal or virtual live meetings, then switch into asynchronous. Then you can come back with another two to three-hour engagement to synthesize and assess the discussion that has been going on,” says Power.

Omnichannel capabilities are still developing

Seamlessly connecting previously disparate channels of engagement is key to creating a truly cohesive customer experience. A few companies, such as Grünenthal Group, are far advanced here and are already working broadly across functions with omnichannel capabilities. Others are still adapting. “We are in a good place with multichannel, but we are not quite there yet with omnichannel and seamless connectivity,” says Power.

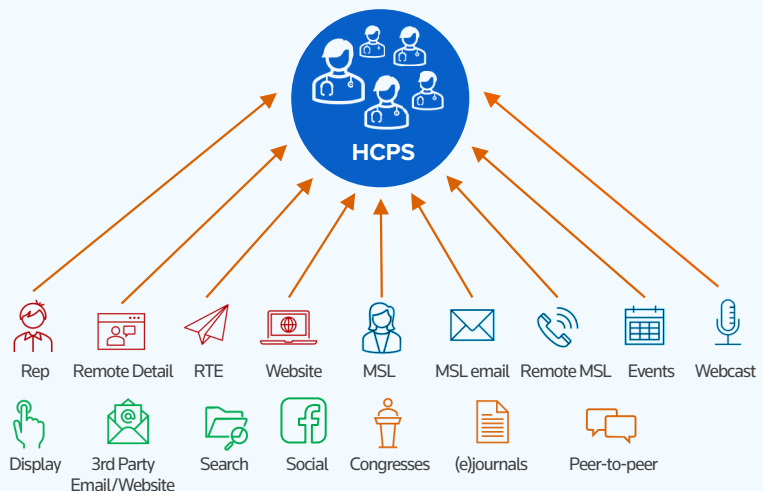
“A superior CX is the ultimate objective – which in turn is the result of using the right channels and content, or microcontent, in a seamless and customer-oriented way,” says Schenck. “Hence, a great CX can only be realized with all customer-facing staff leveraging this information and personalizing their approach throughout the customer journey.”

From multichannel push to the customer-oriented omnichannel North Star

MULTICHANNEL

All touchpoints are available, but not coordinated and one-way; campaigns are brand/company-centric

Subpar customer experience & engagement



REAL RISK OF DIGITAL FATIGUE

Graphic Source Across Health⁷

⁷Omnichannel & Life Sciences: where are we now – and what’s next? - Across Health, keynote speech at BMS conference (2022)

Schenck warns that without close orchestration between channels, personalization will not work. “The result would be a messy, multichannel one-way experience for HCPs more likely to result in digital fatigue for the user and a lack of traction for engagement teams.”

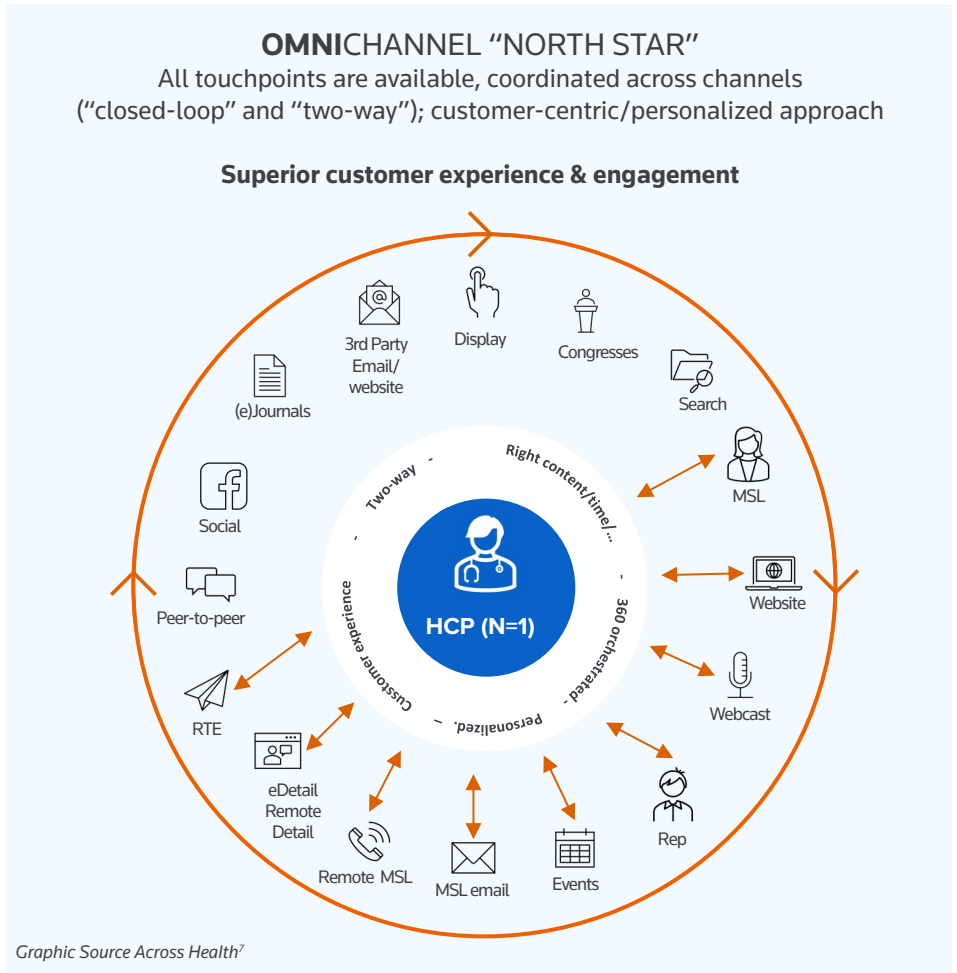
According to a 2022 report from Across Health, without close orchestration between channels, personalization will not work.⁷ The result would be a messy, multichannel one-way experience for HCPs more likely to result in digital fatigue for the user and a lack of traction for engagement teams.

“Rates of maturity and adoption here vary widely,” says Schenck. “We could quote [sci-fi writer] William Gibson here – ‘the future is here; it’s just not evenly distributed yet.’ There are business units that do this very well, and there will be adoption differences.”

About half the pharma companies that Across Health surveyed admit their digital transformation is happening slowly, with fewer than a quarter believing it is rapid.

And some of the latter may be mistaken. “Several pharma organizations overestimate what it is they have achieved in digital and think they are more advanced than they actually are,” says Novartis’ Dobschuetz.

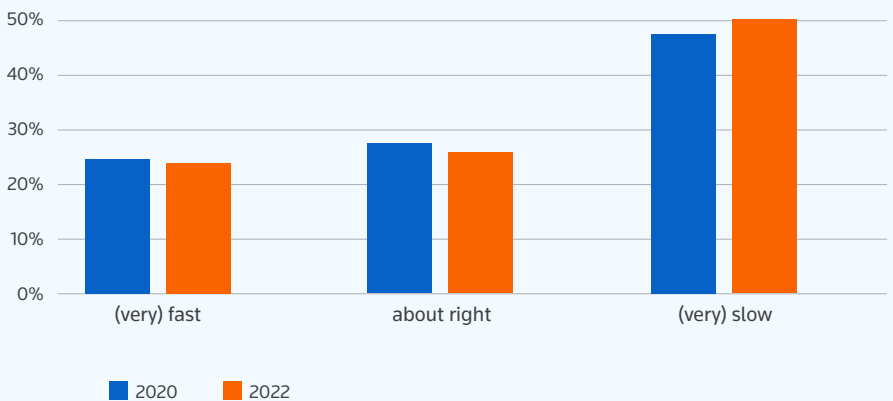
This finding may reflect the relative advances pharma has made in tactical capabilities relating to virtual visits, content and other digital adaptations explored above that have been made possible through extensions to existing systems or business processes. However, progress in strategic capabilities – such as modernizing the data and operating platforms used by respective business and customer teams to enable true omnichannel and hybrid working as the new normal – has been far slower. It is these capabilities that will power close collaboration and unlock the greater part of the omnichannel opportunity.



No sense of urgency in half of biopharma – still

Pharma has traditionally been lagging in digital – but there are early movers

How would you rate the pace of change for digital transformation in your company?



A recent industry survey by DT Consulting found that pharma continues to achieve relatively high levels of digital excellence with its “on-stage” engagement capabilities but is far less mature with the “behind-the-scenes” parts that will enable deep collaboration and strategic advances in customer excellence.⁸

“Elements such as rep-triggered emails, tablet detailing and campaign emails are regularly in demand for time-sensitive product milestones,” it notes. “This creates a virtuous circle: the more they are used, the more refined and mature they become. The danger for pharma firms is that tactical on-stage needs overshadow the greater opportunities to improve digital maturity by focusing on the development of behind-the-scenes capabilities.”

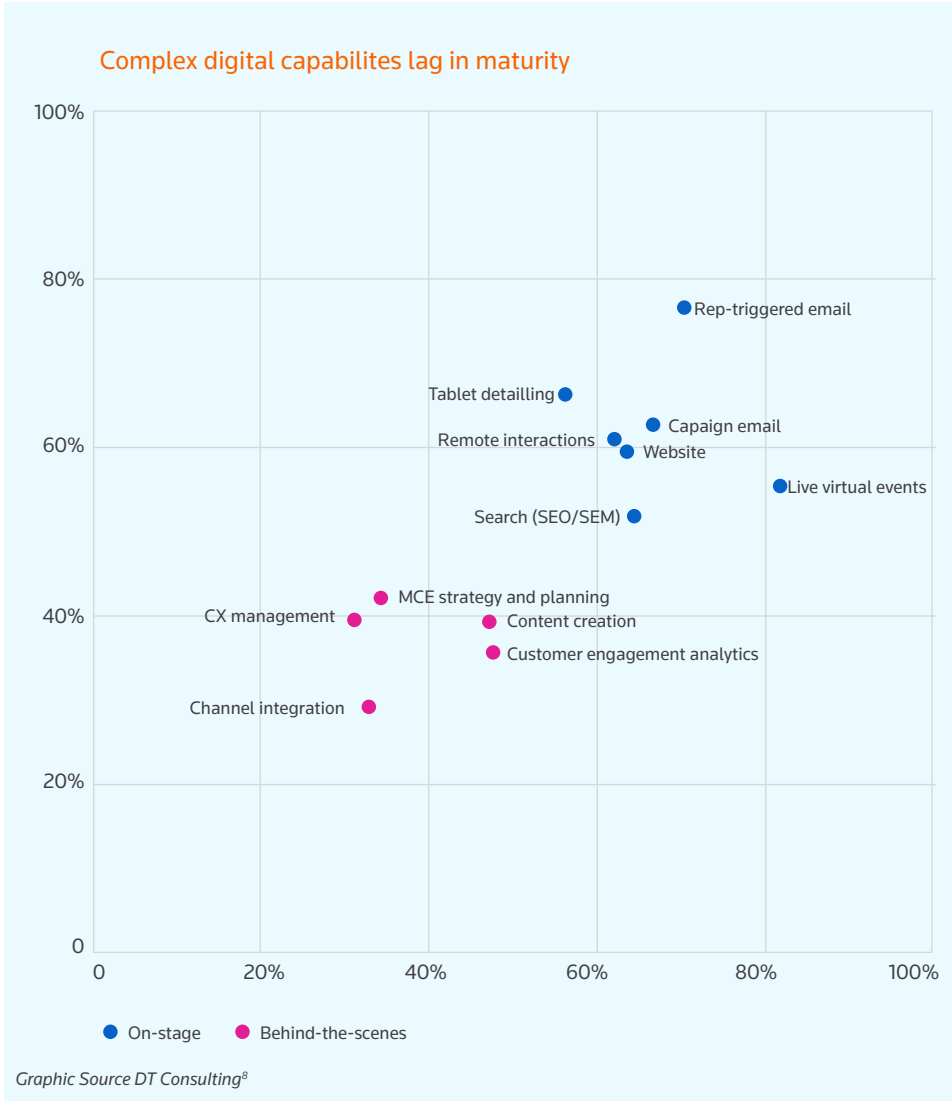
“Healthcare companies went from being lost in a “digitalization jungle” in 2019, to making huge progress in 2020 thanks to the “digital accelerant” of COVID, with many channels being used at scale for the first time as a result of the pandemic,” says Dominic Tyer, Director of Research, DT Consulting, an Indegene Company.

“Healthcare companies went from being lost in a “digitalization jungle” in 2019, to making huge progress in 2020 thanks to the “digital accelerant” of COVID”

Dominic Tyer, Director of Research, DT Consulting, an Indegene Company

Now, two years on, pharma companies must decide what their “future normal” should look like, says Tyer, referring to the customer experience provided to both HCPs and patients. “One of the conclusions from our latest customer experience research is that pharma companies can also do much more to meet patients’ needs and expectations.” Clearly, then, omnichannel working for most of the industry is still a work in progress.

“In the aftermath of “quick-fix” COVID-19 tactics, a renewed and strategic sense of urgency is starting to emerge,” says Schenck. “Customer-centric omnichannel will reduce the cost to serve, improve customer preference and reduce time to peak sales. There is a lot at stake. It’s important to get this right and to be early. We will see tectonic shifts. The laggards will be surprised they don’t have access to physicians anymore. Early leaders will have the advantage.”



⁸ The State of Digital Excellence in The Global Pharmaceutical Industry- DT Consulting (2021) <https://dt-consulting.com/the-state-of-digital-excellence-in-the-global-pharmaceutical-industry-2021/>

Shifts in medical and commercial field forces

Field forces are being rapidly reshaped

Commercial field force restructuring to better fit the new engagement landscape is well underway in some of the largest life sciences organizations. The leaders reshaping their commercial engagement capabilities in this way are doing so because of return on investment (ROI). The relative ROI of the old engagement model vs the new is clear, says Dobschuetz.

Virtual visits create scope to see more customers in less time than field visits. Additionally, they have the added benefit of being able to overlay omnichannel engagement at the same time to enhance a meeting. "It means my overall pie will grow in terms of customer engagement. How I make these high-value engagements is down to me," says Dobschuetz. "If I do it right, I increase the size of the pie; I increase engagement quality, and I save money on the field force."

The model is clearly and overwhelmingly digital-first now. The idea of making an appointment to see an HCP to talk through a digital presentation on a tablet is now quaint. "It's definitely digital first and digital only when it comes to transactional activity," says Dobschuetz. "Which modern, forward-looking HCP wants to spend 30 minutes with a pharma rep rather than getting more education in at their own time or pace?"

A human touch is still essential

Moving to remote-only calls is a debated point. Most of the experts interviewed think that creating a relationship through in-person human interaction is an essential part of engagement, even in digital-first approaches. "Without a human touch, digital promotion is nothing," says

"Without a human touch, digital promotion is nothing"

Francesco Michienzi, Global Business Operations Development Department Director and President of Relife, part of the Menarini Group

Francesco Michienzi, Global Business Operations Development Department Director and President of Relife, "We have many examples, in Germany, in South America, in Australia, and these show us that how we perform as a company depends on us having human contact with customers."

Relife's field force usually visits a selection of physicians. "So, if you have 100 cardiologists, you visit 60% to 70% of them, and that's roughly the same as in other specialties too," says Michienzi. "If you don't meet these people physically, there's no way of gaining results with digital promotion."

Michienzi describes the deployment of field forces as paramount to sales. "You can visit the doctor at the beginning, and you can create a relationship, and then you can maintain the relationship with digital content," says Michienzi. "Current trends show that there are physicians – mainly amongst the younger generations – that are keen to receive medical updates in both traditional and digital ways, so long as the content is valuable."

Michienzi suggests that some practitioners prefer a reduced number of in-person visits per year – maintaining the frequency of contact by using digital content.

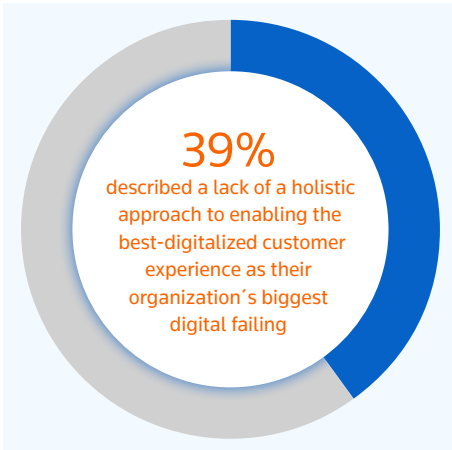
With a hybrid engagement model comes a shift and reshaping of the field force, according to MSD's Holm, who believes that this is going to be the case

with the role of sales representatives in pharma. "I think the rep or whoever is face-to-face needs to embrace that we live in the digital age. Then there's a place for those persons because I think the combination of meeting in-person combined with frictionless online engagement is right now the best way for everyone to interact."

Despite believing there will be a place for face-to-face interactions, Holm ponders on the shape of the field force in the future. "Are we going to see less traditional field forces? Now – or in the very near future – it needs to be more of a hybrid role between marketing and sales. We are seeing this already, where most pharma companies, if not all, are incorporating all the activities together trying to give the customer a better experience – which they deserve."

In the future, payers and the public may also become customers attended to by the field force, not only HCPs. "We will need some positions that are much broader in their roles, with the emergence of not only serving HCPs but serving payers and the public as customers. And the only way you can serve these customers is through a digital presence and a branding presence, which will serve the long tail customers as well, not just the key accounts."

Collaboration between functions is evolving



Data Source Pharma CX Specialty Care Survey – 2021 Report, Exeevo/ Reuters Events®

Our 2021 survey revealed clear appreciation among pharma leaders for the need to collaborate. When asked about unaddressed customer needs in digital engagement, 39% described a lack of a holistic approach to enabling the best-digitalized customer experience as their organization's biggest digital failing. When asked why, the largest group of respondents (38%) attributed this to a mindset gap.

Collaboration between commercial affairs, marketing and medical affairs is seen as vital because HCPs wanted to engage most often with medical affairs. They also wanted better content on demand regardless of which part of the organization with which they were engaging with.

Since then, however, the advances made in cross-functional collaboration have been limited. And so, an extensively personalized engagement activity is still hard to pull off.

Collaborative approaches lack organization-wide cohesion

A fundamental disconnect still exists between the field force and marketing when it comes to new ways of working. "Field teams' intimate understanding of HCP needs remains unstructured

"Every pharma company has its digital engagement teams, but all they are doing is tinkering around the edges. There's no real cut-through towards a real 360 implementation of digital and omnichannel"

Konrad Dobschuetz, speaking as Head of Digital Innovation, Novartis UK

and patchily captured within CRMs. Marketing, meanwhile, is still focused on mass outreach and building brand awareness, rather than moving towards performance marketing," says Schenck.

"Where you have marketing and sales working together, marketing can tap into what's happening during in-person or remote engagements with reps, and, conversely, reps can see their customers' engagements with marketing and medical channels and content. To achieve this "North Star," you need a highly structured and actionable 360-degree customer view."

The resulting advances are tactical, cautious and based on trial and error, says Dobschuetz. "Every pharma company has its digital engagement teams, but all they are doing is tinkering around the edges. There's no real cut-through towards a real 360 implementation of digital and omnichannel."

Pharma is now at an inflexion point, and leaders need to get catalyze a deeper transformation, says Dobschuetz. "It needs to make up its mind. Either you do digital channels properly with proper C-suite-level support in the company, or you don't do it."

He continues "We've made big strides; the pandemic has accelerated everything, and that is great, but now is the crunch point: do I keep investing more in omnichannel and in data overall, or do I start building up face-to-face again, equipping the field force with new tools and see if that old-fashioned model still works?"

Pfizer has achieved some early wins in the way medical affairs and commercial teams can collaborate. "We still have our compliance firewalls, but digital technology allows us to have more seamless communications," says Pfizer's Power.

CRM platform transformation is an investment priority

A recent Everest Group paper identified pharma's ongoing inability to share data dynamically between business functions as a severe barrier to transforming the customer experience.⁹ Most organizations lack a unified data layer to bring together a variety of structured and unstructured data sources (such as call records, emails, online engagement and social media as real-time insights) in order to arrive at the "hyper-personalization" pharma identifies as a critical requirement.

The Everest report noted that legacy CRMs were not built for virtual HCP engagement and require multiple add-ons (and the training needed to work with them), let alone the capabilities to carry out marketing automation or real-time insight building, creating further barriers to supporting collaboration via an omnichannel approach.

“A comprehensive yet dynamic view of customers and their preferences across all digital and non-digital channel interactions is crucial for enterprises to orchestrate hyper-personalized customer journeys. This mandates cross-integration and collaboration across all enterprise functions, including sales, marketing, market access, medical affairs, etc. However, traditional CRM platforms are not designed to

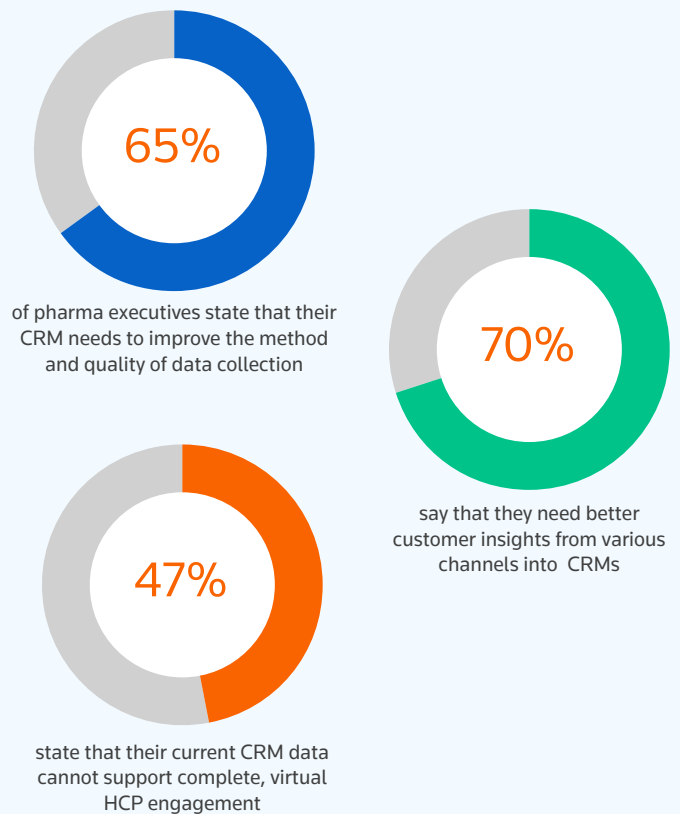
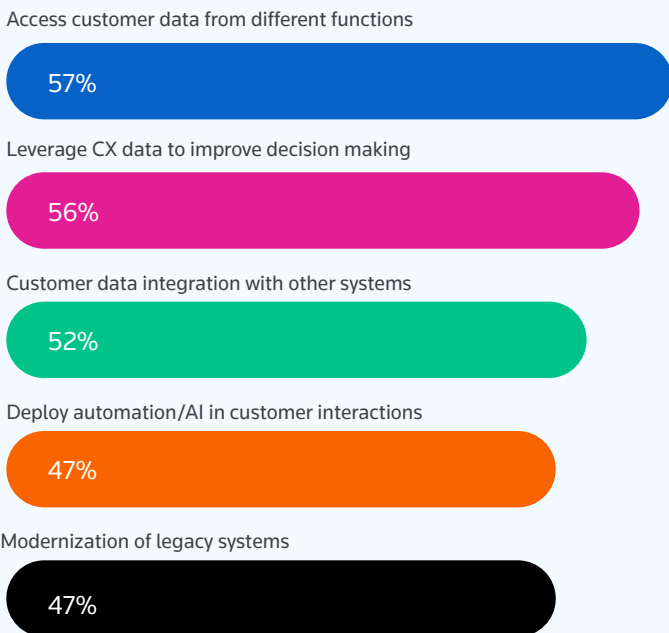
access customer data from different functions and build a holistic customer 360 view, thereby impeding enterprises’ journey towards customer-centric selling,” said Chunky Satija, VP, Everest Group.

A 2020 Harvard Business Review analytics services report for life sciences¹⁰ and the 2020 Reuters and Omnipresence survey¹¹ showed that even pre-pandemic, the majority of CX investments were related to transforming legacy CRM platforms. The top three CX investment priorities were accessing customer data across functions (chosen by 57% of survey respondents), leveraging CX data for better decision making (56%) and customer data integration with other systems (52%).

Investing in such capabilities is foundational to creating the cross-functional, omnichannel engagement capabilities needed to enable collaboration. “Many are reluctant to invest in connected solutions. These are vital to meet the needs of commercial and medical affairs and enable the whole organization to orchestrate its activities around customer needs,” says Chris Wade, AVP Strategic Solutions, Exeevo. “It’s too easy to say, ‘we are doing digital now,’ but what are you doing? How are you changing? A lot of it will still be sinking ever larger amounts in existing solutions in order to expand their capabilities,” says Wade. “The organization needs to be structured to be able to make decisions across functions and be encouraged to critically evaluate current tools.”

Majority of CX investments are tied to the transformation of traditional CRM platforms

Top CX investment priorities of life science enterprise



Data Sources: Harvard Business Review¹⁰ and Reuters Events/ Omnipresence¹¹

⁹ Changing Role of CRM to CX - Customer Experience Transformation - Everest Group (2021), <https://www2.everestgrp.com/reportaction/EGR-2021-46-R-4778/Marketing>

¹⁰ Seizing the Customer Experience Opportunity in Life Sciences - Harvard Business Review Analytics Services (2021), <https://hbr.org/resources/pdfs/comm/salesforce/SalesforceCXLifeSciences.pdf>

¹¹ COVID-19 – Accelerating digital transformation in the life sciences - Reuters Events and Omnipresence (2020), https://1.reutersevents.com/LP=28963?extsource=rep_social

Content - a key part of the engagement mix – remains an under addressed opportunity

Pharma is still pivoting from a model in which content was created primarily for a single channel – the field force – and reused with minimal revision across every other channel.

“As an example, in a 2022 Across Health survey of German doctors, half said the content they saw had not changed; 40% were not happy with the content served to them, and only 7% reported being very satisfied,” says Schenck. “Content is a key advantage, but it has not changed dramatically. That means there’s a lot of opportunity here to create a better customer experience and higher business impact.”

“The one-stop shop, or HCP-oriented (rather than product-oriented) self-service website, has been much discussed, but very few great examples exist. Even during COVID-19, the focus was almost exclusively on rep emails or remote visits or webinars,” says Schenck. “This self-service environment is where marketing and medical can make a difference and is also a key channel in other B2B industries.”

Pharma is still not treating HCPs as individuals

Ideally, a life sciences business will develop a single, well-rounded view of individual HCPs, around which every part of the organization co-ordinates activity. The reality is that multiple functions are producing duplicate content and trying to engage the same HCPs separately. And all too often “personalization” still stops at overly crude segmentation by “type” of HCP.

“A persona describes nothing,” says Mykola Melnyk, Regional Commercial Lead for Eurasia, Asia and Africa at Sanofi Vaccines, “There might be a persona representing people of the same age, income group and profession, but it says nothing about how they live, what they want, how they do things.”

“It’s a complete reality distortion. There are better ways to understand the human being, but no one has cracked it yet. It’s a huge issue. Pharma is far from understanding the HCP as a human being. No one recognizes that humanization is the way to go.”

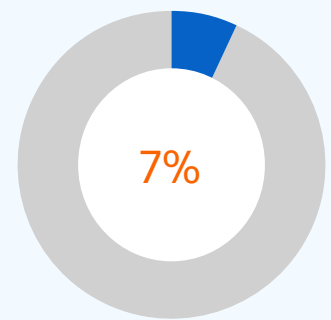
Vanity metrics are redundant in an omnichannel world

Vanity engagement metrics are a sign of a lack of maturity in getting to grips with new collaborative, customer-focused engagement. Reporting metrics are still internally focused rather than customer-driven, tracking the number of engagements or the amount of content produced or consumed, for example. In a world where HCPs are swamped with interactions and content, much of it undifferentiated, these could even be counter-productive activity measures. Even market research or net promoter scores do not offer a valuable route to deeper customer insights.

“Asking customers or field teams about customers will only reveal biased interpretation of reality. Tracking and observing customer behavior offers a much better and more precise view,” says Melnyk. “The day business will understand and act on real rather than claimed behavior is the day when the tide will turn.”

“It’s too easy to say, ‘we are doing digital now,’ but what are you doing? How are you changing?”

Chris Wade, AVP Strategic Solutions, Exeevo



“Only 7% of German doctors reported being very satisfied with content.”

Fonny Schenck, MD, Across Health; EVP, Precision Value & Health

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Mykola Melnyk, Regional Commercial Lead for Eurasia, Asia, Africa, Sanofi.

Omnichannel engagement through collaboration: The way ahead

As explored above, pharma is starting to master the “front stage” of modern engagement and collaboration. Nevertheless, it has a long way to go backstage to create true omnichannel capabilities deep inside the organizational machine. It is these that will unlock the true potential of digital-first engagement. Much more can be done in the short and long term to continue transforming the organization and serve customers with distinction.

Medical and commercial can drive some quick collaborative wins

Improving the handoffs between medical affairs and commercial teams is an achievable short-term goal for many. Perhaps the most crucial initial focus of collaboration efforts should be on key launches. In the early phases of a customer journey with a new brand, especially pre-launch, HCP interest will be focused on medical affairs. The invaluable insights gained often are not shared efficiently, even within the relevant regulatory constraints.

“It will be increasingly important to collaborate crisply and quickly in the pre-launch phase,” says Schenck. “How can commercial compliantly tap into the pre-launch medical engagement so that the messaging and targeting we bring at launch is better? That should be totally possible if you can combine the pre-launch engagements and messaging together into a joint view of the customer and pass that on to marketing, field sales and field MSLs.”

Case Study: Grünenthal’s customer-focused, cross-functional, omnichannel transformation

Since 2021, Grünenthal has been operating on a broad cross-functional basis using teams focused per customer groups. Teams center around commercial excellence, marketing, medical and market access but also include teams like operations and finance. They work to solve the needs, challenges and problems that matter to their customers by delivering a high-quality customer experience.

“Our core expertise is Pain; therefore, we are focused on pain specialists, key GPs, nurses who support them, in fact, anyone who impacts the Pain patient experience.” says Florent Edouard, SVP, Global Head of Commercial Excellence, Grünenthal Group.

“We tested the concept in Germany, Spain and Chile in early 2021,” says Edouard. “We saw this was leading to a better customer experience translating into higher patient satisfaction, and a better, more effective use of our products.”

“An example of physician benefits is we built tailored medical education snippets into the customer journey rather than only as stand-alone. The HCP can learn the science, the disease and the medical practice, and only then do we introduce the possible treatment options.” says Edouard. “It is a very simple example of breaking down silos to create a logical, step-by-step journey for each doctor.”

Grünenthal has created an integrated, cloud-based customer platform incorporating all data from across its channels. Data from digital and face-to-face channels are used to establish broad omnichannel capabilities that empower its teams to serve customers better. “It’s a new go-to-market model, customer-experience driven and omnichannel delivered. We rolled that out across all geographies, and now all affiliates are fully equipped with the capability to do omnichannel.”

Now, Grünenthal is building a customer experience layer over this platform to help improve its performance. By capturing the customer’s voice, Grünenthal aims to drive a more meaningful customer experience.

Digital activity needs to be joined up across the organization

Pharma needs to link digital activity to strategic goals. The technological backbone that supports omnichannel needs to support a range of business functions rather than operating on departmental lines. Otherwise, there is the risk of repeating pre-COVID-19 patterns of investing and engaging in undifferentiated and irrelevant engagement efforts and, consequently, failing the customer.

The right systems have been key to making Grünenthal's transition to omnichannel smooth. It implemented an off-the-shelf, cloud-based approach three years ago that avoids the complexity of trying to link disparate systems.

"We use only standard solutions. We don't tailor; we don't customize. We have a hub architecture, and every system we have plugs into it. All applications are plugged into a central database for a sole source of truth, which allows us to operate at a very low cost, with a very short list of key partners," says Edouard.

Another key decision has been not to have a chief digital officer. Anyone in charge of a product or a customer group is tasked with handling its digital elements along with all their other tasks.

Digital can help serve all customers, not just key accounts

A digital-first engagement paradigm creates new possibilities to reach the "long tail" of potential prescribers. Large commercial field teams have been focused on large, key accounts that may typically have only comprised something like 30%–40% of the addressable prescriber market.

Companies typically spend a large proportion of their marketing budget on a small number of HCPs, but what about the majority? Traditionally, visiting a brand portal has provided a largely generic experience but has been the only promotional channel for those not considered to be high prescribers. Similarly, in medical affairs teams, MSLs spend most of their time working with key opinion leaders, with most HCPs not being addressed by those teams.

"Part of the challenge here is managing content across the disparate digital platforms, all of them with different vendors."

Eddie G M Power PhD MBA GFMD, Vice President, North America Medical Affairs, Hospital, Pfizer Biopharmaceuticals Group

Mastering content matters for cross-functional working

Given the importance of content, pharma should be aiming to develop go-to resources for HCPs that they can access seamlessly, and which can be flexed and tailored according to individual needs.

"That can't be one size fits all," says Pfizer's Power. "A prescriber might want to know about safety and how a drug interacts with others. A pharmacist might be interested in shelf life or a nurse in the appropriate type of needle for a particular infusion. It's the same medicine, different needs. Having that agility to think about the audience and tailor our approach is what we are striving for."

"Part of the challenge here is managing content across the disparate digital platforms, all of them with different vendors," Power adds. "Reorganizing content creation and flow with a more modular approach that cultivates closer coordination between medical affairs and other stakeholders is also essential to creating more personalized and productive content journeys for HCPs."

“We are at a tipping point of realizing it’s not an intensity or escalation game with everyone increasing digital spend and digital engagements. You can’t compete by numbers. Instead, it should be an efficiency game.”

Mykola Melnyk, Regional Commercial Lead for Eurasia, Asia, Africa, Sanofi

Pharma also needs to adapt the current MLR process, including training and incentivizing MLR teams to support the new system, to improve the throughput of new materials. This will allow important and time-sensitive content to be produced efficiently, as well as harnessing advanced technologies. Where a review of content for a congress may have taken precedence before, email and other digital content now need to be given an equal weighting.

“The shift towards dynamic, interactive presentations also requires novel approaches to managing it,” says Power. “You need to curate that content more frequently to make sure it is relevant, current and up to date. As we all know, if you go on a website and the information is the same, after a couple of weeks, we go elsewhere.”

The marketing approach needs dramatic reshaping around customer needs

As pharma rationalizes its field teams, it should not make the mistake of thinking more digital engagement is necessarily better. Intensifying digital activity in this way is analogous to the old approaches to physical engagement that prioritized brute marketing capacity and large field forces.

“The reality is that every HCP is a human being first,” says Mykola Melnyk, Regional Commercial Lead at Sanofi Vaccines, “and this means that there are only 24 hours available each day. Eight for sleep, eight for work and eight for other activities like being a parent, partner or caregiver, etc. During the eight working hours, HCPs literally save lives, relieve suffering and take care of patients. How much time is there for “content consumption?” Few industry players know, and fewer dare to ask. But every company pushes more and more content for their multiple brands to the same HCPs, as if they were just sitting and waiting 24/7 for it to arrive.”

What’s best for the customer should now serve as the benchmark for activity. It requires knowing the customer well, knowing when to time engagements and being respectful of the time they have to spare.

“We are at a tipping point of realizing it’s not an intensity or escalation game with everyone increasing digital spend and digital engagements,” says Melnyk. “You can’t compete by numbers. Instead, it should be an efficiency game.”

“It means not building campaigns because that is how an agency tells us it should be. We need to focus on how much time HCPs have,” says Melnyk. “Is it two or five minutes? We need to work out how to use that precious time and fit our message into it.”

True customer value needs to be the goal

Sweeping change is required in the entire customer marketing approach, from brand planning to the creation and delivery of content. Structuring activity by business unit, franchise or brand in which multiple subdivisions fight to create a campaign for a single customer cannot continue.

“We need a well-thought-out revision of the way companies are marketing to HCPs in the new normal,” says Melnyk, “A strategic rethink of customer-facing activities – but not just operational marketing – is needed. This also means revising the whole go-to-market approach and challenging the alignments and capabilities of all the functions that are involved.”

Engagement team members should consider themselves customer success champions. They should be part of agile, cross-functional teams built around the customer, not the brand, with the freedom to provide HCPs with practical help on the frontline. This might mean, for example, helping HCPs treat more patients. The Novartis digital solutions designed to help GPs in the UK’s NHS is one example of this innovative approach and mindset.

To this end, Grünenthal Group has reconfigured its people around customer-facing, cross-functional teams. “Real genuine cross-functional working creates the space to do new things as it eliminates handovers,” says Edouard. “It’s really important to break the silos. When you have someone from regulatory and compliance early around the table, it allows them to bring their capabilities to serve the customer better. It also brings in diversity that fosters better solutions.”

“It’s an inverted perspective from the traditional approach where people would start shooting at a new idea. Instead, we take an idea and ask how we can make it better, bulletproof it first, and then we take a critical look.

Pharma should rethink who ‘owns’ customer experiences

“‘Owning’ the relationship with a customer tends to create more problems than it solves, especially in a field as complex as medicine,” says Wade. “When it comes to experiences, we’ve seen almost all of the CX-related roles sitting in marketing and focusing primarily on non-personal, promotional tactics. We know how important the role that medical affairs plays from an education and medical information perspective; yet many companies aren’t challenging these operating silos with the new teams and roles that strive to create the omnichannel, cross-functional journeys HCPs and other customers need.”

Medical affairs have become a much more integrated capability and more customer-focused than before at Grünenthal. “It used to be a closed universe of people doing things among themselves. This worked, but the world has changed,” says Edouard. “Now they are fully contributing to help each physician become a better practitioner. Their input on the customer experience is highly valuable, and their alignment on the CX we want to create is key”

How technology is unlocking collaboration across healthcare

Collaboration is not only a big theme within life sciences companies. Many of the near-future advances in improving patient outcomes are only going to happen with broad collaboration. The toolbox of new technologies will play a pivotal role in driving them.

Pharma is waking up to the broad range of possibilities here, including large-scale solutions, such as cloud computing, which is already well-established within the commercial sphere. These act as general-purpose collaboration technology, enabling large clinical trial datasets, exemplified by healthcare-provider-led platform Truveta, to unlock new insights.

Tactical uses of technology, such as MR displays and patient-facing apps that better serve HCPs on the frontline, are also potential areas for innovation. For example, where a rep for a device maker might have helped in the operating room with technical advice, there may now be a willingness to try an MR simulation. “They are starting to think about more futuristic out-of-the box-solutions like remote assist with HoloLens,” says Claire Bonaci, Senior Director, Microsoft Health and Life Sciences.

New technology is also central to innovations in trials and in the growth of outcomes-based medicine. “Collaboration is what pharma is realizing it needs for helping with trials and improving registries, gathering big patient cohorts and so on,” says Bonaci. “We can expect the use of technology to blend into everyday use, much of it app-based and with more simulation. It will be a combination of multiple technologies that will layer on top of each other.”

There is a great opportunity for life sciences businesses to be creative in the way they help HCPs, even more so given the “great resignation” seen in much of healthcare, including the growing shortage of nurses globally, adds Kathleen McGrow DNP, MS, RN, PMP, Chief Nursing Information Officer, Microsoft Health & Life Sciences.

“Pharma can help make the lives of frontline staff easier by working with them to craft new tools and approaches. Technology will be key in taking trials closer to the patient, and this may even prove essential to being able to run trials,” says McGrow. “Pharma is not prepared for the existential workforce crisis we are currently experiencing. If you want to be doing trials and studies, will you have those resources available to you? Being able to leverage artificial intelligence and automate manual processes will help, and pharma needs to think about that.”

“It might be that you have one nurse that is central in one geography handling them remotely. That is where the technology comes in. It has to be app-based, and it has to be simple.”

The greater complexity and growing specialization in how pharma engages across its largest customers also needs more sophisticated management. “Business systems need to support this. How do you design a plan that involves multiple stakeholders across different organizations working together on a project over maybe a couple of years? You can’t run those on spreadsheets and emails,” says Wade.

“This is the other end of a systems change. There is a need to think about that business architecture as we pivot from the self-contained roles of reps towards integrated commercial teams that address multiple aspects of supporting a large organization or network in order to deliver on an outcomes-based contract that makes a sizeable contribution to that market’s results.”

More ambition, and more time, is needed to drive transformational change

The end-state of this process for many life sciences companies will see agile teams of MSLS, marketeers and salespeople designed to identify and meet customer needs, much as Grünenthal is doing now.

But work is still ongoing, according to Edouard. The next step is training people to improve their customer-first approach even further. “That part is not yet complete. We are so product-centric in pharma that thinking of the customer first is still very difficult, not natural. We are working on our people to make sure they always put the customer first. This is the relentless focus of the management team, to make sure we have real customer insights, that we fully use them and that we listen to the feedback.”

“This entails mobilizing every function, not just ones that talk directly to customers,” says Edouard. “If it’s only the front-facing team that does customer-centricity, the back office becomes a liability on the customer experience integrity, and we can’t afford that.”

A simple but powerful example is reimbursing HCPs for travel expenses to a company event. Slow reimbursement may well become a problem if an HCP is used to getting paid within 48 hours, while rapid reimbursement contributes to an excellent customer experience.

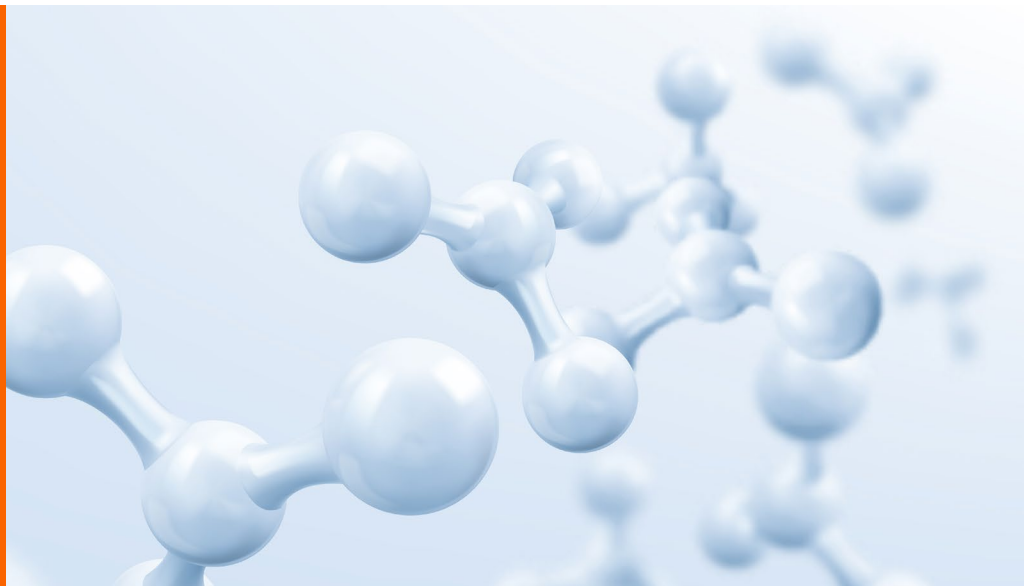
For larger companies, becoming truly customer-facing will not be easy, given the scale of reorientation required. Changing the view of what truly represents a customer insight will be a hard sell in some businesses.

“Imagine telling someone in healthcare C-suite their approach is wrong, especially once they’re full speed in scaling it up and believe it is cutting-edge” says Melnyk. “It requires guts to do so and courage for the one on the receiving end to accept this. Both are necessary for the change urgency to appear, and then a significant cultural shift across the organization is required for the change to take-off.”

Transformation on this scale will take time. Truly rebuilding engagement around the customer at such a scale is a multi-year task, Melnyk believes. “As an industry, we’re going in the right direction, and we’re changing as we go. By the same token, we are only two years into the new normal, and profound change is ahead, so we’re just at the end of the beginning.”

“We are only two years into the new normal, and profound change is ahead, so we’re just at the end of the beginning.”

Mykola Melnyk, Regional Commercial Lead for Eurasia, Asia, Africa, Sanofi.



Conclusion

Since our 2021 white paper “Medical-Commercial: Collaborating to Win in the Digital Era,” pharma has taken significant steps towards leveraging digital technologies and delivering targeted content for HCPs at scale.

The goal has evolved from one where engagement was expected to become entirely digital towards a hybrid engagement model where in-person relationship building and personalized digital omnichannel offerings work together to deliver better ROI.

Even today, traditional engagement practices remain guiding principles in many organizations, with some still hoping for a return to pre-pandemic models. Currently, companies often have duplicate but largely separate views of a customer across different departments or business units, even though that customer sits in a market that is common to the whole organization. Effectively, such systems make it impossible – or at best very difficult – to work with, serve and promote products to customers in a way that will drive coherent, positive experiences.

The goal has evolved from one where engagement was expected to become entirely digital towards a hybrid engagement model where in-person relationship building and personalized digital omnichannel offerings work together to deliver better ROI.

Digital activity needs to be aligned with strategic goals that are shaped around customer needs and joined up across functions. Novel approaches accelerated by the pandemic are seeing good results for leading companies that are utilizing data to effectively and strategically collaborate across functions. In doing so, some organizations are offering up a hybrid engagement model with personal, virtual or asynchronous interactions that are customer focused.

Collaboration between medical, commercial and marketing functions is still seen as the key to achieving the best approach to

engagement and experience building, whether that is in the relevance of content, the responsiveness of channels or the new relationships companies are trying to build.

Personalized digital experiences will see medical affairs at the heart of activity, and local business units will be comprised of differing roles, collaborating across functions to meet customer needs. The digital capabilities of medical affairs are already catching up with those of commercial functions in some organizations, a reflection of the strong preference among HCPs to engage more with medical affairs, as revealed by our 2021 survey.

In the midst of it all, data access and use will play pivotal roles in allowing the personalization of engagement according to individual physician preferences. Purpose-designed infrastructure will be essential to facilitating true cross-functional working.

Since last year, dramatic reshaping and downsizing of the field force by some of the largest pharma companies has happened far faster than our 2021 survey predicted. Senior leadership teams understand that the traditional face-to-face engagement model is no longer meeting the needs of HCPs, which have changed dramatically since the start of the pandemic or delivering the returns it once did. However, this does not mean that the field force will become obsolete.

Instead, roles will change, and the definition of a “customer” will broaden to include payers, the

Dramatic reshaping and downsizing of the field force by some of the largest pharma companies has happened far faster than our 2021 survey predicted

public and patients, all of whom can be engaged through face-to-face activity, as well as through coherent, omnichannel offerings.

Relationships with key customers might not start with face-to-face meetings, but they will certainly be developed through them. These face-to-face meetings can then be supplemented and built on by digital tactics and services. When done well, this hybrid approach delivers excellent CX that has been shown to

improve the company’s reputation as well as customer belief in the usefulness of medicines.

The engagement model has yet to mature and catch up fully with new realities. Despite the tectonic shifts in the engagement model that are well underway, the majority of transformations required to fully maximize on the opportunity and deliver coherent, omnichannel offerings remain to be executed.

It will be interesting to see how far pharma progresses in the year to come, and we hope that you’ll join us in 2023 for our final report asking how pharma will serve and engage its customers in a post-pandemic future.

Thanks

Reuters Events would like to thank the following contributors for sharing their time and insights for this report:

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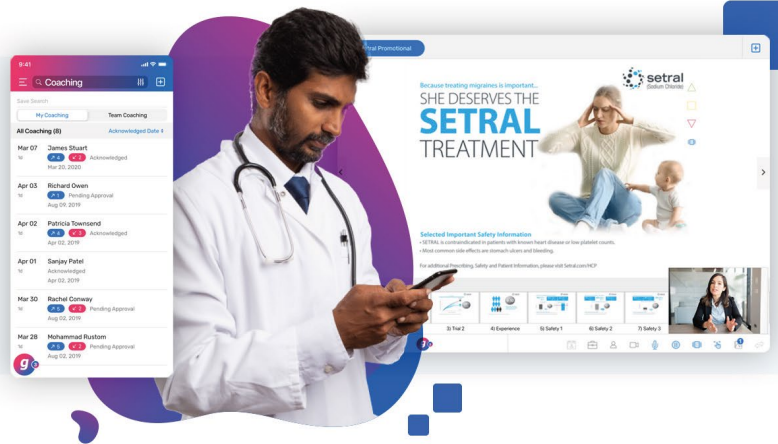
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Omnipresence Achieves Customer Centricity and True Omnichannel Experience

Omnipresence						
Traditional CRM						
Customer & Account Management	Customer Profiles	Account Profile & Plans, KAM	Call Planning & Reporting	Sample & Promotional Materials	Embedded Analytics, Dashboards & KPIs	MDM Synchronization
	Content Approval and Repository	Territory Management	Field Event Planning	Field Coaching	Surveys	Mobile Device & OS Agnostic with Offline
Omnichannel Engagement	Content Sharing	Field-Triggered Social Messaging & Emails	Consent Management	Email Campaigns	Social Post Management	Campaigns & Customer Journey
	Virtual/Remote Meetings	Digital Content Management & Tracking	Event Participant Management	Medical Inquiry, Service Request, Case Management	Expert Service Management	Self-Service Customer Portal
Advanced Insights	ML/AI Territory Optimization	ML/AI Segmentation	Deep Customer Graphs (AI)	Best Predicted Experiences (AI)	Omnichannel Planning	Genee Intelligent Assistant

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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.

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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.



PX 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.