

White Paper

# Medical Affairs' Next Frontier: Unlocking Omnichannel Engagement

How to build deeper customer relationships through personalized experiences

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## Introduction

The COVID-19 pandemic challenged many long-held beliefs that shaped our legacy models, and it has shown us a world of new possibilities. Like other industries, biopharma rapidly pivoted to remote customer engagement and accelerated its use of digital channels, as lockdowns prevented in-person interactions with healthcare professionals. Their expectations have been reset in the process, and HCPs are now looking for personalized experiences that reflect their needs and preferences. Even as in-person interactions have resumed, they have yet to return to pre-pandemic levels which, in some places, they never may. The past is now a foreign country, a hybrid engagement model is here to stay, and it must deliver greater value<sup>1</sup>.

The proliferation of potential engagement channels, alongside customers becoming more sophisticated and demanding, necessitates an orchestrated omnichannel approach that provides a seamless, connected customer journey for a superior experience. This spans all interactions a company has with HCPs, through both commercial teams and medical affairs. It requires close alignment across functions<sup>2</sup>, including content development, such as functionally agnostic information about the disease or standard of care delivered jointly, while product-related messages are compliantly aligned.

In this white paper, we will focus on medical engagement for the dissemination of scientific and medical content. We will explore trends in customer preferences and their expectations, and set out an ambition for an omnichannel approach for medical affairs. We will further elaborate on key enablers for medical omnichannel engagement and the organizational implications for reaching medical affairs' next frontier.



Increase in share of MSL video calls as proportion of all HCP medical contacts, pre-pandemic vs. today (2022)



of physicians identify greater personalization as the main differentiator for making medical engagement more valuable

# **Evolving customer preferences** and expectations

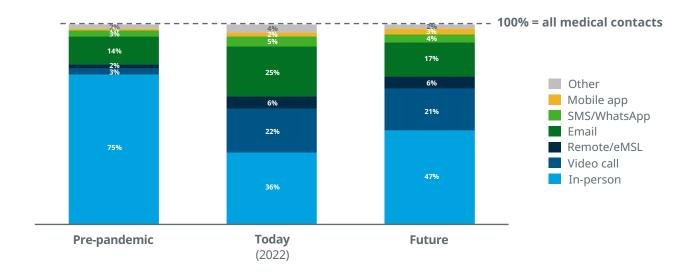
Healthcare professionals' expectations were already changing before the pandemic<sup>3</sup>, partly driven by demographic shifts as digital natives entered the profession, and partly a result of HCPs' experiences as consumers in the digital world spilling over into what they expect in the workplace. The pandemic accelerated this dynamic and profoundly reshaped customer preferences and their expectations, which is reflected in recent trends in medical engagement, as our latest proprietary IQVIA primary research highlights<sup>4</sup>:

- As of September 2022, the average number of MSL interactions per HCP over a six-month period was still at 65% of pre-pandemic levels in EU4/UK and at 73% in the U.S. For context, this compares to in-person contacts of HCPs by sales reps, as at August 2022, reaching 61% of 2019 levels in EU4/UK and 94% in the U.S., as measured by IQVIA ChannelDynamics.
- A hybrid model for medical engagement has emerged. Since the pandemic, we have seen a

- steep increase in the use of remote and digital channels, especially video calls and email, which have significantly grown their share of all HCP medical contacts from 3% and 14% pre-pandemic to 22% and 25% today, respectively.
- Furthermore, HCPs expect video calls and email to retain a significant share of medical contacts in the future, at 21% and 17%, respectively, even as the share of in-person MSL interactions recovers. When asked about the most effective and valuable format for MSL engagement in a survey by the MSL Society<sup>5</sup>, 54% of HCPs identified in-person meetings, 22% rated in-person and virtual meetings equally, while 14% called out virtual meetings.
- The same survey<sup>5</sup> also found that 58% of HCPs rated MSL interactions as more valuable than sales rep visits, with an additional 18% of HCPs rating MSL interactions as much more valuable. Even so, according to IQVIA's latest survey<sup>4</sup>, HCPs do not think that in-person MSL interactions will fully return to pre-pandemic levels and instead will plateau at 47% of all HCP medical contacts in future. This equates to two thirds of their pre-pandemic share, which was 75% (see figure 1).

Figure 1: A hybrid model for medical engagement is here to stay

Medical engagement of HCPs by channel, EU4/UK, U.S. (Share of all medical contacts, %)



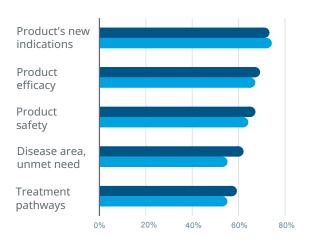
Source: IQVIA proprietary primary research, conducted Aug-Sep. 2022 in EU4/UK, and the U.S., N=911 HCPs

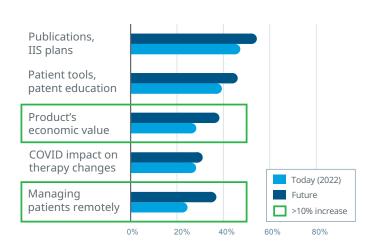
- A majority of HCPs across the EU4/UK and the U.S. also state explicitly that some key changes in how they engage with MSLs have become permanent, specifically remote and virtual engagement, utilizing real-time virtual educational events, and reducing the number of in-person MSL interactions they have.
- The type of information HCPs seek from MSLs is also evolving. While information related to new indications and about a product's efficacy and safety continue to be top priorities, as identified by 70% of HCPs, help with managing patients remotely, and more information about the economic value of new therapies are moving up their priority list by 13% and 10%, respectively, as increase in the share of responses between current and future importance (see figure 2).
- For medical engagement to become more valuable, 61% of HCPs identify greater personalization as the main differentiator, followed by receiving more real-world evidence, especially related to the impact

- on outcomes of treating patients remotely (54% of responses), and information on therapeutic innovations that enable home care and patient self-administration (51% of responses).
- When asked about the biggest challenges for virtual medical affairs engagement, 60% of HCPs identify building relationships with MSLs, while 44% of HCPs highlight discussing complex topics virtually, which makes it particularly hard for new MSLs to effectively engage this way.
- Despite these broadly consistent trends in HCP preferences and expectations across EU4/UK and the U.S., there are noticeable differences between countries. This means a locally tailored medical engagement approach is required, while at the same time ensuring consistency of core messages across countries (see figure 3).

Figure 2: HCPs' priorities are evolving for the information they seek







Source: IQVIA proprietary primary research, conducted Aug-Sep. 2022 in EU4/UK, and the U.S., N=911 HCPs

Our research clearly demonstrates that healthcare professionals have become more sophisticated and more demanding. They seek deeper, more relevant medical insight to help them optimally use treatments and provide better patient care. They expect to receive it preferably in a non-promotional way, as fair and balanced information, at the time, place, and via the channel(s) of their choosing, in a format tailored to a given channel, while being meaningfully contextualized. HCPs are looking for different types of information too, more personalized to their needs, and reflecting the post-pandemic challenges they are facing; patient backlogs, exploring home care and remote treatment to alleviate the operational burden on health systems, navigating an increasingly complex treatment landscape, or optimally utilizing novel, often more complex, therapies.

As HCPs are time-poor and overwhelmed by information they receive from many directions, e.g., from different biopharma companies, different functions within those companies, their peers, professional networks, medical societies and other healthcare stakeholders, the quality of their

experience when engaging with biopharma has become a critical differentiator.

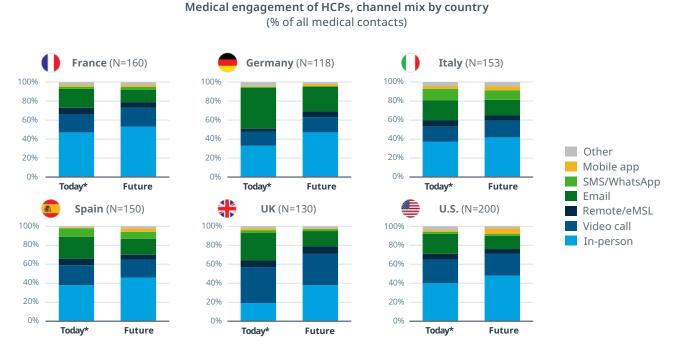
Consequently, successful medical engagement now requires much more than simply providing relevant scientific information to HCPs. How, when and where such information is provided is as important. Equally, HCPs expect greater value through personalization and contextualization, where each piece of information links to the next to provide connected insight for a seamless educational journey, with the ultimate goal of enabling optimal patient care.

Undeniably, the future of medical engagement is omnichannel.

# An ambition for medical omnichannel engagement

Omnichannel engagement differs fundamentally from a multi-channel approach. The latter is channel- and content-centric, with emphasis on disseminating content to HCPs via a range of channels, typically in an unconnected way and with limited customization of content or consideration for the recipient's preferences.

Figure 3: Channel mix for medical engagement varies by country



\*2022 Source: IQVIA proprietary primary research, conducted Aug-Sep. 2022 in EU4/UK, and the U.S., total N=911 HCPs

Conversely, omnichannel engagement is customercentric and has the customer's experience at its very heart. It dynamically aligns with HCPs' preferences and addresses their needs through an integrated, seamless sequence of different touchpoints, including in-person, remote and digital, while carefully balancing push and pull communication. It is highly personalized, to deliver the most relevant content at the right time and place, via the preferred channel(s) and in the most appropriate and user-friendly format (see figure 4).

For example, to initiate the educational journey, an MSL may send a brief, personalized teaser email about a recent trial readout to a HCP who is known to be curious about the latest scientific development in her field. Aligned with her preference for consuming content as a known digital native, the teaser email includes a 2-minute video to provide bite-size highlights of new PRO data. This sparks interest from the HCP and leads to a request for a video call with the MSL, which is scheduled after the HCP's surgery hours to fit around her availability, to discuss the new trial data in detail. Following the video call, the MSL provides the relevant publication upon HCP request. Still curious for additional information,

the HCP accesses a medical portal to self-navigate several reference publications, which in turn leads to an enquiry about potential off-label implications and a request for an in-person MSL meeting. Based on new insight into the HCP's needs, gained during the in-person engagement and from her online search activities, she receives additional information digitally after the meeting, including about two recent real-world studies, while the MSL also extends an invitation for an upcoming medical conference. A series of carefully orchestrated and personalized digital, remote and in-person touchpoints before, during and after the conference follow to continue the seamless educational journey.

Inevitably, delivering such personalized, high-touch and more complex omnichannel HCP engagement at scale requires powerful, technology-enabled tools and solutions.

Figure 4: An ambition for medical omnichannel engagement

### Omnichannel engagement takes HCPs on a continuous educational journey, delivering:

- Relevant content, at the right time and place, via the preferred channel(s) and format.
- Connected and contextualized insight.
- A seamless, personalized experience dynamically aligned with individual needs and preferences.



Source: IQVIA EMEA Thought Leadership

Medical omnichannel engagement provides several important and differentiated benefits:

- Firstly, it creates a connected medical educational journey which keeps HCPs engaged throughout, on their terms, and delivers a superior customer experience. Its ultimate goal is to make medical education an effortless, intuitive and rewarding experience for HCPs which keeps them on this journey, thereby continuously enhancing their knowledge to enable the optimal treatment of patients. This avoids HCP disengagement as a result of communication dead ends, caused, for example, by context-free one-off messaging or too many disjointed and, in the worst case, even irrelevant messages from the same company.
- Secondly, a continuous educational journey enables deeper relationships via two-way dialogue between biopharma companies and HCPs, to build trust on the basis of greater relevance and consistency of the HCP engagement experience. It helps cement a company's reputation as a trusted partner, and also creates stronger HCP recognition of a product's scientific and patient value narrative for higher impact.
- Finally, an omnichannel approach also unlocks greater efficiencies by making optimal use of a company's resources, for example expanding the reach of medical engagement to a wider HCP audience, including traditionally 'no-see' HCPs, from a fixed cost base of digital infrastructure. Or focusing the more expensive in-person engagement by MSLs on what they do best building and deepening HCP relationships while ensuring that relevant, personalized content is connected to and available before, during and after the in-person touchpoint via other channels, remote and digital, including HCP self-navigation.

While the underlying philosophy and core principles of omnichannel engagement apply to both commercial and medical, there are some important differences.

Crucially, medical omnichannel engagement must always be non-promotional, with focus on unbranded,

scientific and balanced messages. For example, this may mean referencing other products within or outside a given drug class or, where possible, always sharing safety data alongside efficacy data. Furthermore, given the key role of medical affairs as the voice of the patient within a biopharma company, medical omnichannel engagement would look at HCPs' needs through a lens of helping them achieve optimal patient outcomes. Therefore, its major focus is disseminating new evidence, peer-to-peer, to provide relevant, balanced insight around disease, unmet need, treatment pathways, new guidelines and the best use of therapies.

Unlike commercial teams, medical affairs can engage HCPs during the critical pre-launch phase and also address unsolicited off-label enquiries. Given the importance of establishing a product's scientific and patient value narrative well before launch, to build early advocacy amongst HCPs<sup>6,7</sup>, especially with external experts, medical omnichannel engagement is essential for maximizing the impact of a company's launch preparations.

# Key enablers for medical omnichannel engagement

Successful medical omnichannel engagement is much more sophisticated and dynamic than the traditional approach to medical education. It requires greater precision, agility and close alignment between functions.

Five key enablers are critical to achieve this (see figure 5).

#### **INSIGHT**

Successful omnichannel engagement rests on a foundation of deep customer understanding, including their preferences, interests and needs, to enable greater precision in personalization of medical content, its contextualization and delivery, i.e., the right content via the right channel, at the right time and place. It requires granular, data-driven behavioral profiling, and identification of HCP personas that are defined by their needs and preferences. It involves collecting and integrating customer information across all

touchpoints, for example feedback from field teams, and capturing HCP behavior in the digital world, e.g., opening of emails and links, listening to podcasts, joining webinars, or visiting websites and downloading publications (see case study 1). Turning that wealth of information into a coherent, deeper customer understanding and, ultimately, actionable insight is critical to power omnichannel engagement8.

#### **PLANNING**

Omnichannel engagement requires integrated, joined-up customer engagement plans, informed by deep customer insight, that are developed by a cross-functional brand team, comprising commercial, medical and market access. Those granular, integrated plans define, at territory level, how customer needs are addressed through joined-up, orchestrated and personalized engagement across functions and channels. Furthermore, as a prerequisite for both a seamless, differentiated customer experience and to maximize the impact of a product's scientific and patient value narrative, customer engagement plans must be aligned with the scientific communication strategy and the overall brand strategy.

#### CONTENT

Content is king. It is the primary driver of both HCPs' interest and the perceived value they receive, and thus it must be compelling and of the highest quality. Personalization adds an extra value layer, by dynamically aligning content with HCPs' needs and their preferences. However, meaningful personalization creates greater complexity and requires organizational speed and agility. To deliver this at scale, companies must establish a well-resourced and technologyenabled content engine for generating and curating relevant, engaging content that can be readily personalized to HCPs' needs and be adapted for different channels to create an intuitive, effortless and rewarding customer experience. Modular content building blocks are key to this, e.g., developing a preapproved content repository which can be re-used and re-assembled, as is a streamlined medical, legal, regulatory review (MLR) process, including smart process automation where feasible, to enable agility.

Figure 5: Key enablers for omnichannel engagement

## **Insight Planning Technology Metrics Content**

- Deep customer insight to enable personalization of medical content, its contextualization, delivery
- Granular, data-driven behavioral HCP profiling
- Mapping of HCP personas
- Integrated, joined-up customer engagement plans
- Informed by deep customer insight into needs, preference
- Developed by a crossfunctional brand team, incl. commercial. medical, access
- Aligned with scientific and brand communication strategy

- · Agile content engine for rapid personalization
- Modular content building blocks, e.g., pre-approved content repository
- Streamlined MLR process to enable speed, agility
- Compelling visualization, interactive formats: content tailored to each channel
- Enabling technology infrastructure: insight, consent, content, engagement
- Advanced analytics to integrate all insight, inform next best scientific action
- Engagement platforms, e.g., content portals. video calls, automated messaging, eMSL
- Embedded within workflows

- Activity and impact metrics, tracked longitudinally vs. competitors by channel, HCP and scientific topic
- Ongoing monitoring; closed feedback loop to adapt and refine omnichannel engagement approach

Source: IQVIA EMEA Thought Leadership

#### **TECHNOLOGY**

Enabling technology infrastructure is critical for delivering medical omnichannel engagement. It powers four important components:

- Insight generation: A comprehensive CRM system is needed to capture and integrate information gathered from across customer touchpoints, including in-person, remote and digital, in (near) real time. Adding an application layer of advanced analytics and AI tools transforms such information into deep customer insight by creating a 360-degree profile of HCPs, to reveal their persona based on needs and preferences. In turn, this forms the basis for informing the personalization of content and engagement approach, including next best scientific action (see case study 2), at the individual HCP level, to make every contact count.
- Consent management: Obtaining and managing HCP consent at scale, for use of personal data, is a critical prerequisite for ensuring compliance of a company's omnichannel engagement with a growing number of data privacy regulations, such as GDPR. A technology solution is key for collecting, storing and documenting HCP consent and to create a timestamped, digital audit trail for when such consent was granted and for what purposes. To be GDPR compliant, it must also allow individuals to access, modify or withdraw their consent at any time, for example, HCP consent given for disclosure, e-mail use or contact preferences.
- Content engine: Agile personalization at scale requires process automation and digital workflows that draw on modular, pre-approved content building blocks hosted on a digital repository. These components are used to assemble relevant, tailored content for individual HCP interactions, with its format optimized for a given channel, e.g., personalized follow-up emails after a medical conference.
- Engagement platforms: Technology also underpins the actual delivery of customer engagement itself,

e.g., via video conferencing platforms, automated messaging, HCP service portals, mobile apps or eMSLs. Ensuring different systems are connected is key for delivering joined-up HCP engagement and a coherent customer experience.

#### **METRICS**

Given the complexity of omnichannel medical engagement and its dynamic nature, with many moving parts involved, it is paramount to measure both activities, across the different channels. and their impact.

Understanding activities is important to align channel mix and calibrate contact volumes based on HCP preferences and the competitive context. But ultimately, impact matters and relevant metrics must go beyond capturing the immediate, transactional HCP response to a contact, such as clicks on links or email opening rates. Instead, impact metrics need to measure change in HCP behavior, for example, external expert advocacy, e.g., peer introductions or advocating the scientific narrative; adherence to the latest guidelines; increase in HCP knowledge, e.g., registration for an event or CME course, online engagement with specific disease and product content; and the Share of Scientific Voice™ achieved (see case study  $3)^{9,10}$ .

Those sets of activity and impact metrics must be monitored on an ongoing basis as part of a closed feedback loop, to understand what works and what doesn't, and to adapt and refine the omnichannel approach accordingly, to maximize the impact of medical engagement.

### IQVIA AIM XR™ delivers deep insight into HCPs' digital behavior

Understanding HCPs' behavior in the digital world, including their research activity and consumption pattern for digital medical content, to enable personalized, omnichannel engagement for medical affairs.

#### **SOLUTION**

IQVIA Audience Identity Manager (U.S. only) compliantly captures the digital behavior of 1.1 million U.S.-based HCPs across over 5,000 medical websites. It provides daily insight into HCP-level digital research activity, which is contextualized by brand, indication, disease, competitor and type of website visited. By capturing over 250 million research events per month, IQVIA AIM XR™ enables personalized medical engagement at scale.

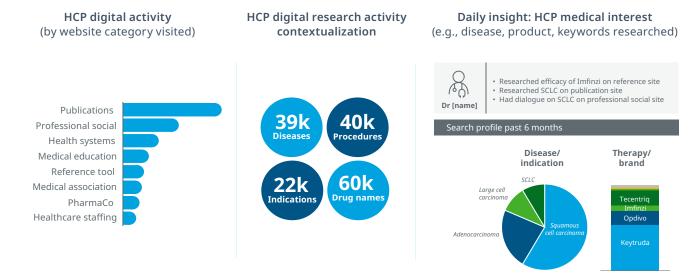
When integrated with other insight, e.g., information captured in CRM systems and feedback from the field, application of advanced analytical tools can create a 360-degree profile of HCPs — a holistic view of their interests, preferences and needs, including medical educational gaps.

#### **USE CASES**

Deep digital behavioral insight forms the foundation for successful medical omnichannel engagement and supports an optimal medical communications strategy. For example, it helps refine profiling of HCPs, including digital scientific leaders and community-based HCPs, identify HCPs with unmet scientific information needs and expand the HCP universe for medical engagement, including inroads to 'no see' HCPs, or inform content creation, such as a scientific communications platform aligned with HCPs' research interests that addresses their medical educational gaps.

Furthermore, insight into (near) real-time, digital behavior of HCPs enables optimal medical engagement across channels, and powers nextbest scientific actions, e.g., triggering introductory/ follow-up emails, relevant social media messaging, or offline interactions, e.g., triggering an MSL alert and helping them provide the right content at the right time, to make every HCP interaction impactful.

Figure 6: Understanding digital behavior of U.S. HCPs





- Compliantly captures daily digital behavior of 1.1 million U.S. HCPs across 5,000 medical website
- Provides contextualized, NPI-level insight: HCP digital content consumption and behavior





#### Use cases in medical engagement

- Identify HCPs with unmet informational needs
- Integrate with other CRM information to create HCP 360-profile
  Inform scientific communications platform, e.g., educational data gaps
- Personalize medical engagement, including content and channel
   Power next best action, e.g., trigger introductory emails from MSL; sequencing of engagement channels

### **IQVIA Next Best scientific action for medical affairs**

#### **ISSUE**

Identifying the next best steps for the medical engagement of HCPs, with particular focus on external experts (EEs), to deliver the right content at the right time via their preferred communication channel.

#### **SOLUTION**

IQVIA Next Best is an AI-driven, best-in-class recommendation engine that turns insight into actions to power omnichannel engagement<sup>11</sup>. By pragmatically combining business rules- and machine learning (ML)-based approaches, IQVIA Next Best provides actionable, contextualized and timely recommendations that are embedded within MSL workflows, to ensure rapid adoption by users. It draws on deep intelligence from integrating a wealth of customer information from across touchpoints, including feedback from the field and digital behavioral insight.

#### **USE CASES**

Next Best scientific recommendations guide different aspects of optimizing medical engagement of individual HCPs/EEs, for example:

• Planning: Provide context for MSL actions, for example flagging a HCP's/EE's unmet medical information need following an unresolved MI enquiry, to guide topics for future engagement; facilitate team coordination, by sharing details of recent contacts by other team members to inform suggestions for MSL outreach, or check-in reminders to maintain visit cadence requested by a HCP/EE.

- Content: Guide MSLs to share specific content with HCPs/EEs, such as notifications for making contact on key scientific topics, data dissemination alerts when new significant information becomes available that matches HCP/EE interest, or suggesting invitations to conferences, trial participation and co-authorship of publications.
- Channel: Provide omnichannel suggestions to MSLs, for example email open notifications to understand HCP/EE engagement with shared content and inform next steps, or reminders for HCP/EE outreach, including channel suggestions such as personalized email, 1:1 visit, triggered as follow-up to a key event, such as a HCP/ EE presenting at a conference or publishing a scientific paper.

Recommended actions also include administrative prompts to ensure high quality, up-to-date customer intelligence is maintained as the foundation for successful Next Best Action, for example data capture reminders for MSLs to enter key details of their most recent HCP/EE engagement, or alerts to update HCP/EE profiles with the latest insight into their areas of interest or communication preferences.

## Measuring impact through IQVIA Share of Scientific Voice™ to enhance medical engagement

#### **ISSUE**

Measuring the impact of evidence dissemination and medical engagement, to optimize the external engagement strategy.

#### **SOLUTION**

IQVIA Share of Scientific Voice™ (SoSV) objectively measures the disseminations and external medical engagement for a company's product and its strategic topics, across all scientific evidence compared to its competitors, such as share within a relevant therapeutic cohort. It provides longitudinal insight over time, along key dimensions for scientific dissemination and external medical engagement, including relative presence by topic, by individual external expert, by dissemination channel, for example presentations vs. publications, or at specific events, which can be weighted by impact factor of journals, conferences or meetings9.

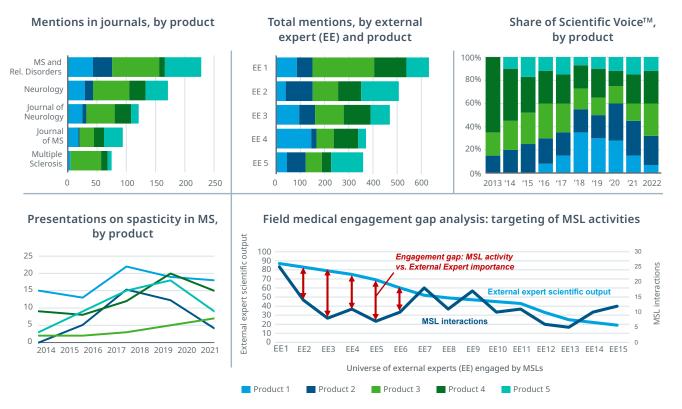
Accurately measuring SoSV requires a complete data set of competitive scientific activities. IQVIA

SoSV is powered by the world's largest scientific data lake, which, per year, captures over 22,000 scientific meetings, 10,000 grant round meetings, 1.5 million meeting abstracts, relevant patents, guidelines and external expert profiles globally. It taps into 26 different clinical trial sources and scientifically-relevant social media and digital news feeds.

#### **USE CASES**

IQVIA Share of Scientific Voice™ provides unique insight to drive key decisions on scientific dissemination and external medical engagement, to maximize impact, such as defining precise KPIs to inform the medical engagement strategy, refining territory planning and effectively targeting MSL activities, for example towards more impactful external experts, aligning content focus with external experts' medical imperatives, or optimizing channel/content mix when SoSV is combined with HCP behavioral insight.

Figure 7: Share of Scientific Voice™ to guide medical engagement



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## **Omnichannel maturity: Where** does the industry stand today?

The promise of omnichannel engagement is widely recognized across the biopharmaceutical industry, with 74% of companies surveyed by IQVIA identifying it as a high priority<sup>12</sup>. However, most companies still face a significant gap between aspiration and reality.

To date, efforts across the industry have predominantly focused on embedding omnichannel engagement for commercial teams, where most of the progress has been made. Even so, full maturity in commercial omnichannel engagement has not yet been achieved. In a recent poll by IQVIA<sup>13</sup>, 56% of respondents said they have started to embrace a hybrid (omnichannel) model for HCP engagement, but they still have more to do, while 22% were only at a pilot stage and just 13% felt they have got it right so far.

Integrated engagement planning, building the enabling technology infrastructure, and generating deep customer insight were identified as the top three gaps in omnichannel maturity, while 82% of respondents highlighted organizational challenges, including structure, governance, skills and ways of working, as major barriers to successfully implementing an omnichannel approach<sup>12</sup>.

Medical affairs has traditionally lagged behind commercial in digital maturity, which underpins successful omnichannel engagement. This is partly driven by the more complex nature of the scientific exchange between medical affairs and HCPs which favors an in-person setting, while companies often start building digital infrastructure focused on supporting commercial, with medical not given due consideration at the time.

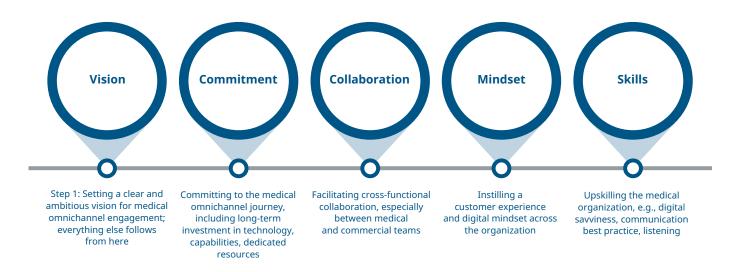
However, as omnichannel is increasingly being recognized as the future of medical engagement, medical affairs organizations are beginning to make strides in addressing the digital gap. This is a prerequisite to embarking on the medical omnichannel journey, and to catching up with their commercial counterparts to enable an aligned, cross-functional approach to planning and customer engagement.

### How to deliver the ambition for medical omnichannel engagement

We have identified five organizational priorities that biopharma companies need to focus on, to deliver the ambition for medical omnichannel engagement and to realize its full potential (see figure 8):

- 1. Setting a clear, aspirational vision for medical omnichannel engagement from which everything else follows.
- 2. Committing to the medical omnichannel journey, including long-term investment in enabling infrastructure, resources and capabilities.
- 3. Facilitating cross-functional collaboration, especially between medical and commercial teams<sup>14</sup>.
- 4. Instilling a customer experience and digital mindset across the entire organization.
- 5. Upskilling the medical organization, for example, on digital savviness, best practice in content delivery via storytelling vs. 'data dumps', how to be engaging in remote communication, and effective listening and probing to explore customer needs and preferences<sup>15,16,17</sup>.

Figure 8: Five organizational priorities to realize the full potential of medical omnichannel engagement



#### **Change management**

A structured approach to change management is needed to create organizational buy-in across field teams and office-based functions, for embedding new ways of working and behaviors and to take the organization along the omnichannel journey.

Source: IQVIA EMEA Thought Leadership

Addressing these priorities involves making some key choices, and requires change management to create organizational buy-in across both field teams and office-based functions. This is crucial to bring about the transformation in how the medical organization engages with its customers, and disseminates scientific and medical content by embracing an omnichannel approach.

#### I. KEY CHOICES AND COMPLIANCE

Companies need to make key choices about where the information barrier between commercial and medical will start and end, to reflect their attitude to the perceived exposure to potential compliance risk. For example:

- Are we comfortable using a single technology platform that is shared between commercial and medical?
- · How much information about HCPs are we prepared to share between functions within our CRM system(s)?
- · What are the boundaries for joint planning of HCP engagement across functions?

Those choices are not clear cut and often involve a number of grey areas. Therefore, this will require a balanced approach applying differentiated, case-based and objective risk assessment supported by robust processes and governance, with quidance from the compliance and legal functions.

#### **II. CHANGE MANAGEMENT**

A company's journey towards establishing an omnichannel engagement model requires a structured approach to change management, which 82% of biopharma companies identified as a major barrier to implementation in a proprietary industry survey conducted by IQVIA12.

In addition to the 'hard' elements of change, such as building the requisite technology infrastructure, defining new processes or hiring new talent, addressing its 'soft' aspects is as critical to take an organization along that journey, especially with a view towards changing its culture and embedding new ways of working, and behaviors.

Successful change management starts by articulating a clear and compelling vision for an aspirational future ("I understand where we will need to be in the future and why"). Executive sponsorship and assigning a dedicated, capable, high profile team signal organizational commitment to that vision ("This must be important — the best people are working on this"). Role models displaying the desired behaviors, and sharing of success stories bring the vision to life and demonstrate its viability ("I can see the future and it works"). Finally, setting clear and bold expectations for individuals and supporting them on their individual change journey, such as equipping them through ongoing learning and coaching, while reinforcing new behaviors with aligned incentives and accountability, will embed change throughout the organization ("Now I understand what I need to do differently. This is going to happen — this will not go away").

In the end, medical omnichannel engagement must go beyond being customer-centric. It needs to be peoplecentric in the broadest sense to succeed.



## **Closing thoughts**

Omnichannel is the next frontier for medical engagement and the dissemination of scientific and medical content. As HCPs' expectations have evolved and become more demanding, medical omnichannel engagement is critical to meet and exceed those expectations by delivering a seamless, personalized medical education journey, for a superior customer experience that aligns with HCPs' needs and their preferences.

Companies that do this well will stand out in an increasingly competitive world and will build deeper, lasting customer relationships based on relevance and trust. They will enhance healthcare professionals' disease understanding and therapy knowledge and, ultimately, enable optimal treatment for better patient outcomes.

The alternative is falling irredeemably behind.

## References

- Riding out the storm: The future of postpandemic customer engagement; IQVIA white paper, 2022; https://www.igvia.com/library/ white-papers/riding-out-the-storm-the-future-ofpost-pandemic-customer-engagement
- 2. The Future of Medical Affairs 2030; Medical Affairs Professional Society, 2022; https:// medicalaffairs.org/future-medical-affairs-2030/
- Channel Preference in an increasingly complex promotional landscape; IQVIA white paper, 2021; https://www.iqvia.com/library/white-papers/hcpchannel-preference-in-an-increasingly-complexpromotional-landscape
- IQVIA proprietary HCP survey in EU4/UK and the U.S., conducted August-September 2022; findings presented at IQVIA webinar 'The Post-Pandemic Voice of the Customer: HCP Engagement Preferences'; 30 September 2022
- 5. Key Opinion Leaders Reveal the Value of Medical Science Liaison, Medical Science Liaison Society (MSLS); survey of 203 KOLs across 33 specialties based in the U.S., 2021
- 6. Rabea, M. (2022) Understanding the Factors that Impact the Pre-Launch Phase and New Product Launch Excellence in the Pharmaceutical Industry. American Journal of Industrial and Business Management, 12; 10.4236/ ajibm.2022.121007
- Medical Launch Readiness: Making or breaking a successful launch; IQVIA white paper, 2019; https://www.iqvia.com/library/white-papers/ medical-launch-readiness
- 8. McLoughlin M, Jonkman M, Zivkov M. Moving to an integrated, holistic approach to insightsrelated activities in medical affairs; Medical Affairs Professional Society, 2021; https:// medicalaffairs.org/wp-content/uploads/2022/05/ Holistic-Integrated-Insights.pdf

- 9. Laudano J, Dutton G, Leveraging Medical Affairs Analytics to Enhance Engagement and Demonstrate Value. The Journal of the Medical Science Liaison Society, 19 October 2021; https:// themsljournal.com/article/leveraging-medicalaffairs-analytics-to-enhance-engagement-anddemonstrate-value/
- 10. Traylor L, Patel R, Chasing the Elusive Field Medical Affairs Impact Metric. The Journal of the Medical Science Liaison Society, 22 July 2022; https://themsljournal.com/article/chasing-theelusive-field-medical-affairs-impact-metric/
- 11. Achieve Omnichannel Success, IQVIA Technologies; https://www.igvia.com/solutions/ technologies/performance-management-andinsights/next-best
- 12. IQVIA proprietary survey 'Omnichannel Management: Status Quo in Pharma', 2021
- 13. Embrace hybrid HCP engagement or risk falling behind; IQVIA blog, 2022; Embrace hybrid HCP engagement or risk falling behind - IQVIA
- 14. Their finest hour: Medical affairs in a disrupted world; IQVIA white paper, 2022; https://www. iqvia.com/library/white-papers/their-finest-hourmedical-affairs-in-a-disrupted-world
- 15. Beyond the field: Evolving Field Medical Engagement and Talent for the Future; Medical Affairs Professional Society, 2021; https:// medicalaffairs.org/beyond-the-field-evolvingfield-medical-engagement-and-talent-for-thefuture/
- 16. Ghosh R, Mohanasundaram S, Shetty S, Menon S; Preparing for the next normal: transformation in the role of medical affairs following the COVID-19 pandemic. Pharmaceut Med. 2021; https:// pubmed.ncbi.nlm.nih.gov/34224113/
- Holder D, Fraser W, Howman E, Harnessing 17. Cross-Industry Collaboration to Navigate the Evolving Field Medical Landscape; Medical Affairs Professional Society, Elevate November 2022; MAPS Elevate Harnessing Cross-Industry Collaboration (medicalaffairs.org)

## About the authors



**MARKUS GORES** Vice President, EMEA Thought Leadership, **IQVIA** 

Markus has over 20 years of experience in life sciences, advising clients in all major geographies on a broad range of topics, including real-world evidence strategy, launch readiness, go-to-market models, brand and commercial strategies, and building enabling organizational capabilities.

Markus is a frequent speaker on the latest industry trends and regularly engages with senior leadership teams of pharmaceutical companies.

Prior to his current role in Thought Leadership, he has held leadership positions within IQVIA Real World Solutions and QuintilesIMS Consulting Services (formerly the IMS Consulting Group).

Markus holds a PhD in Pharmaceutical Chemistry from the University of Hanover and has completed postdoctoral research at the University of California.



REINHARD BERKELS. Senior Director, Global Medical Affairs Strategy, **IQVIA** 

Reinhard has more than 15 years of Medical Affairs experience in the pharmaceutical industry, holding country-level, regional and global roles. He has successfully covered all facets of Medical Affairs, including launch readiness, digital transformation, RWE generation, medical education, MSL excellence and medical strategy, and was responsible for leading Medical Affairs teams with direct accountability to senior management.

Reinhard has broad knowledge of healthcare ecosystems and deep therapy area expertise spanning cardiology, neurology and immunology.

Prior to his current role, and before moving into Medical Affairs, Reinhard gained experience in drug discovery and pre-clinical development in the pharmaceutical industry.

He holds a PhD degree in Biology from the University of Cologne and is a lecturer (Privat-Dozent) for Pharmacology at the University Clinic of Cologne.

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