



With more sources of medical info than ever—both in print and online—many doctors are making the decision to unplug from pharma. **Peter Mehr** on how to reach them in the age of digital media

Healthcare providers have indicated that there is no single answer in how they gather the information they need to make treatment decisions. Studies show that HCPs get information from many channels, all driven by personal preferences. What's striking about this is the difference between how HCPs gather and consume information, via a personalized approach, and the “one size fits all” way in which the pharmaceutical industry delivers information.

How did this disconnect happen? And how can pharma reconnect with HCPs? To address these questions, let's take a look back.

When frequency was king

During the late 1990s into the early 2000s, the goal of almost all promotion plans was to deliver a high level of frequency to targeted HCPs. It was believed that higher frequency led to higher sales.

Non-personal promotion, mostly direct mail and email, was targeted to HCPs that the sales force was unable to provide with the optimal detail frequency. The goal was to deliver the tactic—it was an afterthought as to whether these tactics produced a positive ROI.

Since delivering the tactic was the goal, there was little to no customer-level data collected or saved about how customers engaged with the tactic. HCPs, with few alternative sources of information available, had to absorb the frequency barrage from pharma.

The power shift

From the mid-2000s to today, two dynamics occurred: first, the digitization of media changed how HCPs receive and consume information, and the number of sources for medical information has significantly increased. This let HCPs begin to take control.

Because of this, the second dynamic that we have seen is reduced HCP access. HCPs are restricting or blocking access to sales reps and also opting out of pharma-sponsored marketing promotion.

The fact that pharmas are still focused on delivering frequency, while HCPs are now taking control of what, when and where they receive information, has led to an interesting paradigm: HCPs are more reachable than ever and are actively searching for medical information, but are less accessible to companies.

Tailor vs. torrent

HCPs will engage with pharma as long as the information provided is delivered in a way that is tailored to each HCP's preferences. There are three steps to accomplishing this:

1 Collect HCP data: By collecting and merging HCP data—IP address data from digital promotion, business reply cards from direct mail—it's possible to understand when an HCP prefers to engage and identify his or her channel and message preferences.

2 Replace non-personal promotion with marketing: Marketing strives to deliver higher customer engagement and higher ROI, as HCPs choose to engage with a program that is designed and tailored to their preferences.

3 Integrate promotion plans across marketing and sales: Using HCP-level data to understand how they consume information is key to designing the optimal integrated promotion plan.

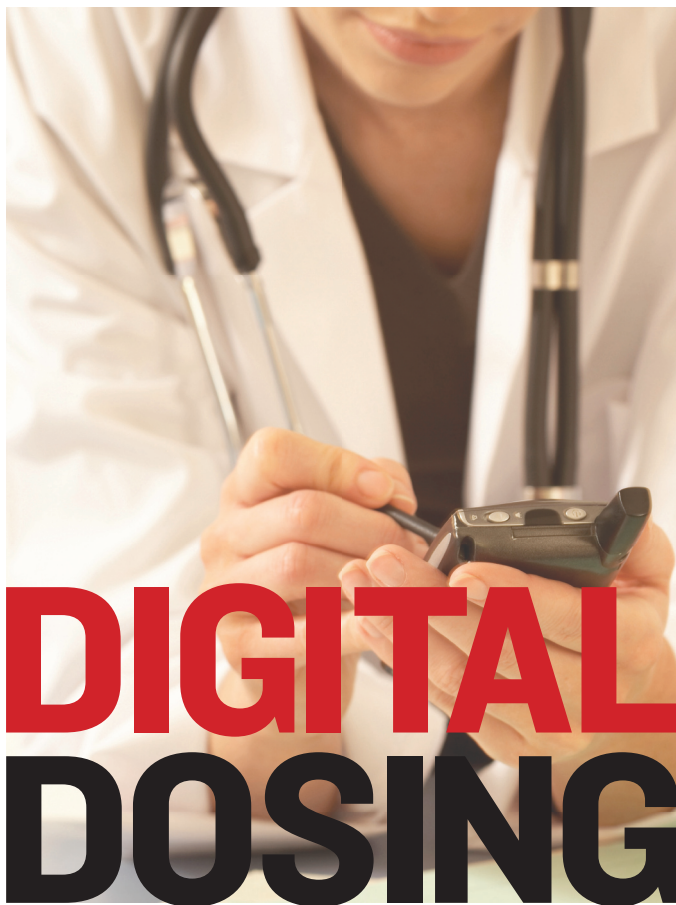
Tailoring promotion plans based upon customer preferences is commonplace across many industries, including insurance, banking, travel and entertainment and nonprofit. What these industries have mastered is listening to customers and then driving promotion strategies based upon that customer input. Pharma has an excellent opportunity to follow suit. ■

Peter Mehr, PhD, is chief strategy officer, life sciences, Merkle.



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With more sources of medical info than ever, many doctors are choosing to unplug from that pharma. **Peter Mehr** on how to reach HCPs in the age of digital media

Healthcare providers have indicated that there is no single answer in how they gather the information they need to make treatment decisions. In fact, HCPs stated that they use multiple sources of information accessed via numerous multiple channels, all driven by personal preferences.

What's striking about this is the dramatic difference between how HCPs gather and consume information, via a very personalized approach, and how the pharmaceutical industry delivers information, via a "one size fits all" promotion strategy.

How did this disconnect between HCPs and pharma happen? More importantly, how can pharmaceutical companies reconnect with HCPs? To address these questions, it's instructive to take a look back.

When frequency was king

During the late 1990s into the early 2000s, the goal of almost all promotion plans was to deliver a high level of frequency to targeted

HCPs. It was believed that higher frequency—from the sales force and non-personal promotion channels—led to higher sales.

Non-personal promotion, typically consisting of direct mail and email, was targeted to those HCPs where the sales force was unable to provide the optimal detail frequency. The goal for non-personal promotion was simply to deliver the tactic. It was an afterthought as to whether these tactics produced a positive ROI.

Since delivering the tactic was the goal, there was little to no customer level data collected or saved about how customers engaged with the tactic. HCPs, with few alternative sources of information available, had to absorb the frequency barrage from pharma.

The power shift

From the mid-2000s to today, two dynamics occurred: first, the digitization of media significantly changed how HCPs receive and consume information. It is now possible to reach HCPs using mobile messaging and banner ads targeted to their computer based upon IP address, among other channels.

Additionally, the number of sources for medical information has significantly increased. This empowered HCPs—they could now decide what information to access, when to access it, and how to access it. HCPs began to take control.

Because of this, the second dynamic that we have seen is reduced HCP access. HCPs are restricting or blocking access to sales reps and also opting out of pharma-sponsored marketing promotion.

The fact that pharmas are still focused on delivering frequency, while HCPs are now taking control of what, when and where they receive information, has led to an interesting paradigm: HCPs are more reachable than ever and are actively searching for medical information, but are less accessible to companies.

Threading that needle

HCPs will engage with pharma as long as the information provided is delivered in a way that is tailored to that HCP's preferences. There are three steps to accomplishing this:

1 Start collecting HCP data. Almost every brand team spends promotion dollars across digital, offline and sales force promotion. Each channel generates HCP data. By collecting and merging HCP data—IP address data from digital promotion, business reply cards from direct mail, etc.—it's possible to understand when an HCP prefers to engage and identify his or her channel and message preferences.

2 Replace non-personal promotion with marketing. Where non-personal promotion focused on delivering frequency, marketing is focused on delivering an integrated conversation across tactics over time. Marketing strives to deliver higher customer engagement and higher ROI, as HCPs choose to engage with a program that is designed and tailored to their preferences.

3 Integrate promotion plans across marketing and sales. The objective is to deliver a well-designed, tailored customer experience across all promotion channels. Using HCP-level data to understand how they consume information is a key driver to designing the optimal, integrated promotion plan.

Tailoring promotion plans based upon customer preferences is commonplace across many industries, including insurance, banking, travel and entertainment and nonprofit. What these industries have mastered is listening to customers and then driving promotion strategies based upon that customer input. Pharma has an excellent opportunity to follow suit.