

Demystifying customer experience for medical affairs

Building dynamic engagements with key opinion leaders

By Sunil John and Shrikkanth Gopalan



Background

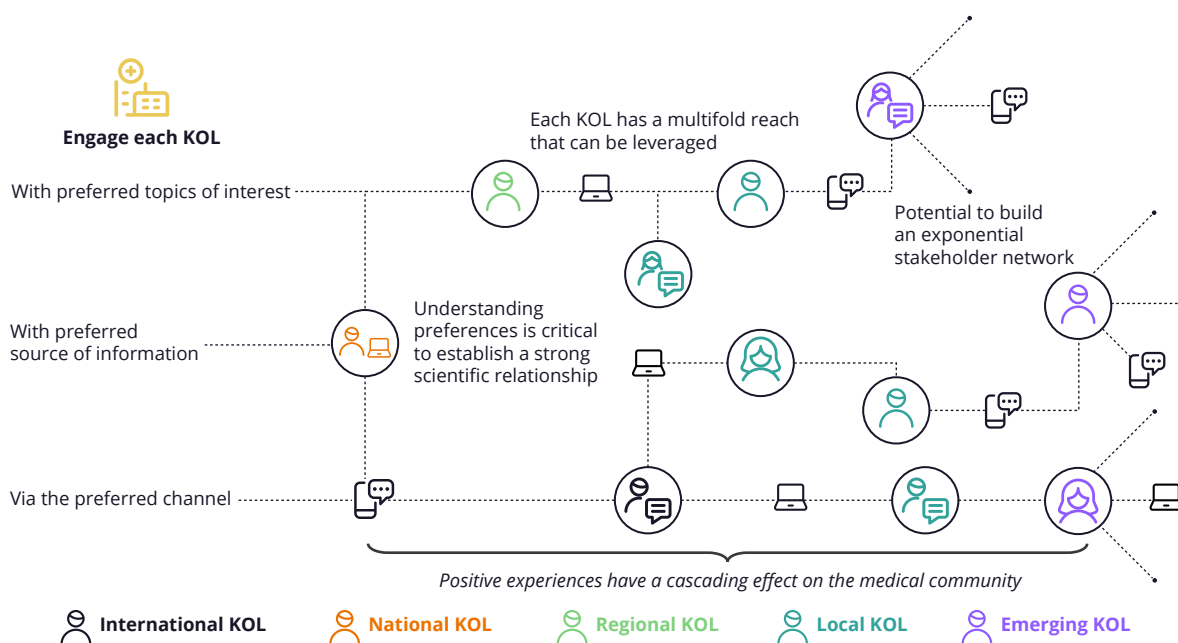
Today, medical affairs organizations are witnessing a digital revolution. These changes will completely redefine medical affairs organizations' go-to-market engagement strategies. As virtual interactions have gained immense acceptance, engagements between key opinion leaders (KOLs) and medical science liaisons (MSLs) have undergone a sea of change. Not even two-thirds of the interactions in the future are slated to be face to face, and hybrid interactions will be the norm. The majority of KOLs are extremely comfortable and satisfied with virtual MSL engagements.¹ The importance of scientific information and the unique data needs of different stakeholder types has also increased. So has the amount of data being shared with these stakeholders via digital modes.

With these rapid changes to the engagement landscape, customer experience has gained immense prominence. There's an underlying need to define and implement strategies that result in a positive customer experience for medical affairs stakeholders. Network of influence is one parameter MSLs should use to identify which stakeholder to engage. By ensuring that we understand the drivers of a KOL's customer experience, we're able to have a downstream cascading effect on the KOL's entire network. As we replicate these positive customer experiences across KOLs, the impact increases exponentially.

¹ ZS, "ZS medical affairs outlook report 2021," <https://www.zs.com/insights/zs-medical-affairs-outlook-report-2021>.

FIGURE 1:

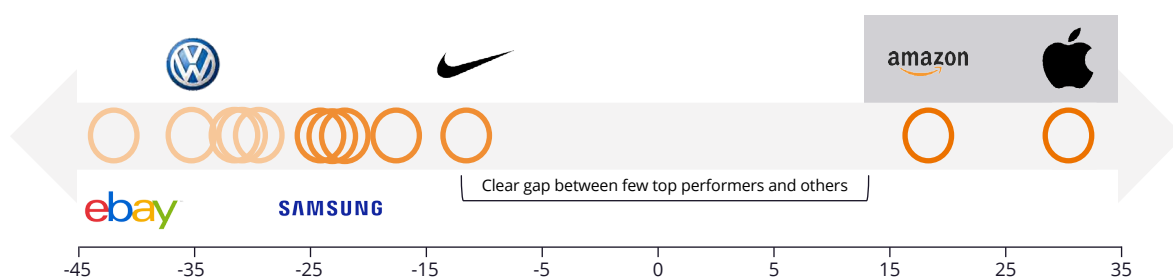
Key opinion leaders' network of influence



Irrespective of the industry, ZS's analysis found that organizations today are focusing on customer centricity as the anchor for developing future strategies since experience drives the perceptions that ultimately help strengthen relationships.

FIGURE 2:

Customer experience spectrum for non-pharma companies



ZS's analysis of the customer experience across pharma medical affairs organizations shows that there **seems to be a lot of room** for pharma companies to improve and become truly customer-centric.

FIGURE 3:

Customer experience spectrum for medical affairs organizations

Medical affairs leaders should focus on enhancing the overall customer experience quotient. Digital and omnichannel modes of interactions are becoming increasingly important, and it's necessary to design engagement strategies by embracing this concept to ensure sustained engagements with both existing and new customers.



Why is omnichannel important for medical affairs?

The shift toward digital has opened up a range of channels and sources for information mining and exchange. KOLs can access scientific information from multiple information sources, ranging from journals and professional societies to social media, physician and patient portals. Similarly, the channels for sharing information have also increased to include virtual meetings, podcasts, webinars, etc. The result is that KOLs get a lot of information on a daily basis but minimal attention paid to their preferences.

Driving positive engagements with KOLs in today's rapidly changing pharma landscape means ensuring that the right data is being made available to the right customer via the right channel at the right time. A combination of these aspects is absolutely necessary and important, but in order to achieve this, medical affairs must first assess the information transfer mechanisms and customer preferences in the right way.

Given the nonpromotional nature of medical affairs, assessing the impact of engagements for medical is a complex process. The impact of engagements cannot be tied back to any ROI-based metrics. Another very difficult aspect is understanding the effectiveness of engagements via multiple non-personal engagement modes. Lack of appropriate data capture, the highly complex nature of the scientific content and adherence to compliance are the other challenges to be addressed.

The need of the hour is to understand the key drivers for customer experience, identify information consumption patterns, engagement preferences of the KOLs and use these inputs to design KOL personas. Companies also need to assess the quantitative impact of information sources and dissemination channels in a nonpromotional and compliant way. Assessing this will allow them to develop a roadmap for setting up an omnichannel engagement model for medical affairs.

We recommend five key pillars to enable medical affairs organizations to reimagine their go-to-market strategy via clearly articulated plans for addressing the unique needs of well-defined customer segments, thereby driving a positive customer experience. The pillars are:

- Areas of interest
- Engagement drivers
- Source affinity
- Channel affinity
- Topic affinity

In this white paper, we'll dive deep into each of these pillars and understand the drivers for the development of a dynamic experience-driven omnichannel engagement model for medical affairs, with an end objective of creating a positive customer experience. Our framework and recommendations below are based on ZS research with KOLs plus the in-depth analysis and insights developed using multiple analytical methodologies on top of that research.

Methodology

ZS conducted a detailed analysis across KOLs to assess their evolving needs and preferences in today's dynamic landscape. Participants included 150 KOLs from the U.S., U.K., France, Germany, Spain and Italy. These participants were spread across therapy areas such as oncology, cardiology and neurology. Participating KOLs provided their perspectives across several topics, including their preferred sources, channels, topics and what drives their customer experience. All the outcomes detailed below are a result of the in-depth quantitative analysis techniques, methodologies and algorithms that ZS employed in addition to our deep expertise and data in the medical affairs domain.

Our analysis found that the participating KOLs differ in the way they approach treatment. The majority (44%) of the KOLs mentioned that they were ready to explore all available treatment options beyond the guideline recommendations and use their best judgment for treatment. This was closely followed by the 38% of KOLs indicating that they're comfortable with adopting newer therapies or treatments if they see the potential. Close to one-fifth (18%) of the KOLs said that their treatment decisions are driven by the existing standard of care as recommended by guidelines. These variations in KOL attitudes and perceptions emphasize the need for developing KOL archetypes.

Key findings

Pharma companies need to invest heavily to understand the true experience drivers and revamp engagement strategies so they reflect the needs of the stakeholders. Medical teams will need to look beyond the static KOL tiers and design KOL archetypes or personas based on their specific needs and preferences.

To make an impact, companies will need to build customized engagement planners to equip medical personnel with the what (to share and discuss), where (to get the information from) and how (to share the information) before an interaction. For example, a cardiologist in a teaching hospital may be interested in receiving clinical trial updates via email, while a pulmonologist in a single physician practice setting may want to discuss product-specific topics with an MSL.

KOLs are seeking tailored information as per their needs. But there has been an exponential increase in the availability of scientific data, an increase further accelerated by content digitization. Hence, sharing relevant and valuable information is extremely important for sustained engagements in today's world.

Delivering information via the right channels is critical given the recent increase in the accessibility to non-personal channels. As KOLs adapt to these new channels, knowing the high-impact channels for different KOL archetypes is crucial.

To summarize, medical affairs organizations need to figure out the impact of information sources and channels plus the topics that KOLs are most interested in. All of this while ensuring they don't use ROI-based metrics to do this and are completely compliant throughout. Most methodologies don't work as there's no end objective that we can maximize our approach for. At ZS, we define this in a very different way—by looking at the end objective that an MSL is working toward, which is increasing the scientific knowledge of the KOLs. Once we can define the source, channel and topic affinity, the creation of KOL personas for medical affairs to drive positive omnichannel customer experiences is an attainable task.









Quantifying source affinity

To start, we need to assess the impact of an information source, which is extremely complex in the case of medical affairs, as the increase in knowledge of the KOL by referring to a particular source is very hard to measure. ZS has performed an in-depth analysis and developed a proprietary methodology as one way to identify the high-impact sources of scientific information. This impact has been quantified by deploying quantitative techniques, leveraging historical information and medical affairs experience of close to a decade.

The ZS proprietary algorithm is designed to assess the knowledge contribution of a scientific source along with multiple other parameters. These parameters have been analyzed together in a unique way to develop the ZS proprietary metric called MASI® (Medical Affairs Source Index). MASI® helps quantify the impact of every source. Based on our analysis, professional society websites and MSLs emerged as the sources of information that had the most impact. Our analysis also found an opportunity for pharma websites and pharma medical information centers to improve their effectiveness as information sources. Thus, the MASI® scores clearly quantify the impact of each source, enabling decision-making.

FIGURE 4:

The impact of sources based on ZS's MASI[®] analysis

Information sources	Medical Affairs Source Index (MASI [®])
 Medical literature	0.128
 Professional society/organization websites	0.225
 Colleagues/peers	0.088
 Field-based MSLs	0.165
 Pharma manufacturer websites	0.120
 Educational videos	0.096
 Government websites	0.086
 Medical information centers	0.089

■ Highly effective (>0.15)

■ Moderately effective (0.10-0.15)

■ Least effective (<0.1)

Quantifying channel affinity

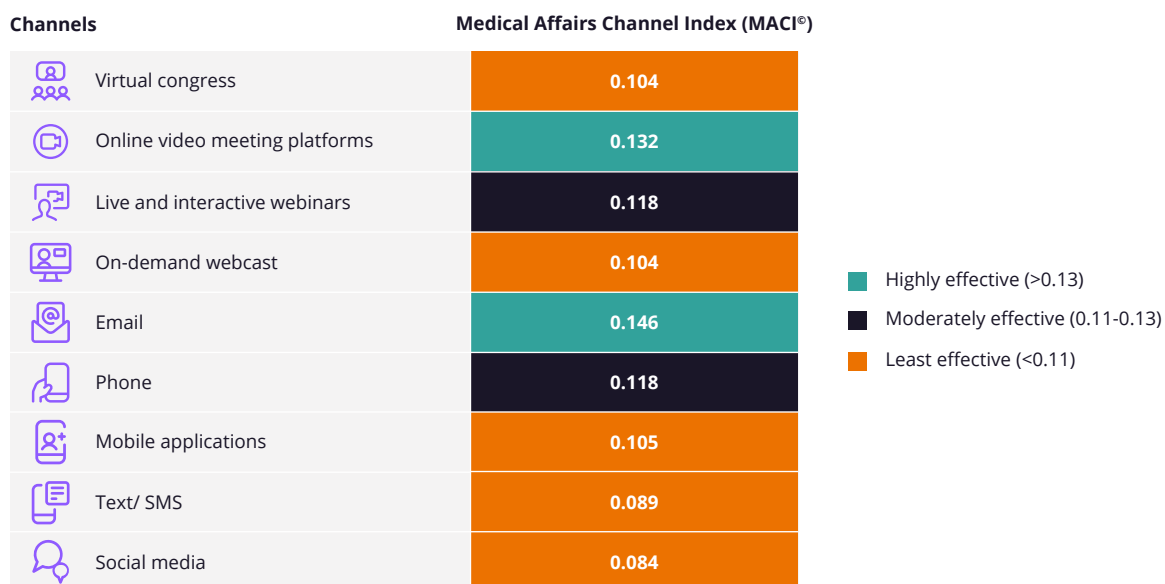
With booming content and the need for customized engagements, it's imperative for medical teams to identify the right channel for transferring information and, most importantly, deploy a mix of channels that aligns with the broader customer journey and customer preferences. This is necessary to maximize the impact of every engagement. In the absence of any ROI-based metric, developing a channel mix for medical is very difficult since the output or the impact of the channel cannot be a metric related to sales or any other commercial metric.

ZS has developed MACI[®] (Medical Affairs Channel Index) as a metric that can be used to quantify the impact of a channel. The MACI[®] is derived based on an in-depth analysis of multiple parameters to help understand the impact of every channel and, thus, enable investment decisions.

Based on the MACI[®] analysis, email and video meeting platforms emerged as the most effective channels for engaging with KOLs. Live and interactive webinars also featured in the list of top three high impact channels, indicating a gradual shift and acceptance toward in-person virtual and interactive digital platforms. Social media seems to make the least impact, despite having a high frequency of use.

FIGURE 5:

The impact of channels based on ZS's MACI® analysis



Building a dynamic engagement planner

While the source and the channel impact help solve for the where (to get data) and the how (to share), knowing what topics to discuss with the KOLs is equally important. Knowing the preferred topic and type of information preferred by the KOL completes the engagement triad and helps establish the right steps before beginning each interaction with a KOL. Our analysis found that clinical trial data, product questions and a deeper understanding of science are the most preferred topics for the KOLs.

Some interesting topic preferences were observed across different KOL types:

- Digital influencers are interested in discussing pipeline products.
- Emerging KOLs are interested in information on research program support.

The source, topic and channel are the three core elements that establish the right foundation for omnichannel customer-centric engagements. When the preferred sources, channels and topics are stacked up against each other, the result is a comprehensive engagement plan that can be a ready reckoner for different medical teams such as MSLs, medical information, medical education, etc. Such plans can be a part of the plan of action for the medical teams engaging with different stakeholders. The engagement planner can also provide insights that can help deploy pharma medical personnel to engage on topics where they aren't currently the preferred source. For example, how can the medical information team use information from professional societies to enhance the quality of their responses?

FIGURE 6:

The 3 core elements together as an omnichannel engagement foundation

Topic affinity (ranked as important)		Preferred source	Preferred channel
Clinical trials, results and data	66%	Medical literature	Virtual congress; live and interactive webinars
Product questions	54%	Pharmaceutical manufacturer websites	Email
Deeper understanding of science about the product	52%	Medical literature	Live and interactive webinars
Disease state questions	41%	Medical literature	Virtual congress
Information about treatment landscape	41%	Professional society/ organization websites	Virtual congress
Discussion regarding pipeline products	41%	Field-based MSLs	Live and interactive webinars
Adverse events	33%	Medical literature	Virtual congress
Approach and challenges associated with telehealth/ telemedicine	29%	Professional society/ organization websites	Online video meeting platforms (Zoom, Skype, etc.); live and interactive webinars; virtual congress
Research program support for trials	27%	Professional society/ organization websites	Virtual congress
Health economics data	15%	Colleagues/peers	Social media (Twitter, Facebook, YouTube, etc.)



Personalizing KOL engagements

Indexes such as the MASI® and MACI® combined with the preferred topics enable the slicing and dicing of engagement data across multiple demographic variables to develop customized engagement plans for specific customer segments. The flexibility to view and analyze information consumption preferences across numerous customer segments creates a multidimensional outlook toward shaping customized engagements. This helps drive tailored and high-impact customer engagements in a compliant and nonpromotional way.

An example of such a personalized engagement plan has been outlined below, where each box in the grid across a therapy area and KOL experience bucket highlights the high-impact source, channel, topic and engagement driver for the particular segment.

FIGURE 7:

Engagement preferences by customer segment

Therapy Area \ KOL Experience	Low Experience		Medium Experience		High Experience	
Oncology	Medical literature	Email	Medical literature; field-based MSLs	Virtual congress		Email
	Clinical trials	Engagements that prompt me to follow up with actions	Clinical trials	Engagement opportunities with the company	Deeper understanding of the science about the product	Company's pipeline products
Neurology	Medical literature		Medical literature	Online video meeting platforms	Colleagues/peers	
	Information about treatment landscape	Engagement opportunities with the company	Clinical trials	Engagements that prompt me to follow up with actions	Product questions	Engagements that prompt me to follow up with actions
Respiratory/ Pulmonary/ Allergy			Medical literature	Live and interactive webinars		
	Deeper understanding of science about the product; clinical trials		Product questions; information about treatment landscape	Engagements that prompt me to follow up with actions	Product questions	Company's pipeline products; engagements that prompt me to follow up with actions
Cardiology	Medical literature	On-demand webcast; social media	Medical literature	Virtual congress	Medical literature; field-based MSLs	
	Clinical trials	Engagements that prompt me to follow up with actions	Clinical trials	Company's pipeline products; engagements that prompt me to follow up with actions	Clinical trials	Responsiveness, characteristics and attributes of medical affairs personnel

All cardiology KOLs have a common topic of interest

For highly experienced cardiologists, characteristics of medical affairs personnel is a driver of experience

Source	Channel
Topic	Engagement driver

Medical literature (journals, articles, reference books and statistical data); clinical trials, results and data (e.g. clinical study design, patient subpopulation, patient recruitment, endpoints, readouts, etc.); engagement opportunities with the company (research, Advisory Boards , etc.); engagements that prompt me to follow up with actions (participation in a clinical trial, change in the way I treat patients, utilize information provided in speeches or publications or teachings, ask for a follow-up visit, etc.)

These matrices aid the development of objective-driven action plans and help the medical personnel create personalized and positive engagements, thereby enhancing the customer experience quotient. The matrices also provide a clear pathway for medical organizations to design and deploy their omnichannel engagement strategy.

Designing KOL archetypes and personas

Finally, with all the available analysis, the objective should be to clearly define KOL archetypes that will help medical organizations tweak their go-to-market strategy and refine engagement plans. Defining these archetypes allows organizations to:

- Tailor engagement plans that are pertinent and relevant to the stakeholder
- Revamp strategies and focus on agile planning basis evolving market and landscape changes
- Build on existing KOL tiers and add more depth to the existing knowledge of KOL preferences and attributes
- Identify new opportunities for KOL engagements with the pharma or medical affairs organization

Below is an example of a KOL archetype derived as a part of the ZS analysis.

Active engager:

I eagerly engage with companies for disease area and treatment landscape-based topics. In addition to medical literature, I prefer company and government websites for scientific information. I engage with pharmaceutical companies, especially through online video meeting platforms. I'm also interested in product questions. For engaging on this topic, online video meeting platforms, on-demand webcasts and email are my preferred channels. Engagement opportunities provided by the pharma company help drive my experience with them.

The other KOL archetypes, derived via the analysis, are clinically led KOLs and keen researchers. The clinically led KOLs are more conventional with a keen interest in congresses, conferences and literature. They tend to stay away from non-personal channels and prefer engaging with MSLs. The keen researchers exhibit a moderate interest in non-personal channels but won't shy away from using channels such as emails and social media. They're most interested in pipeline data and trials.

Such archetypes, combined with the KOL engagement planners, create a very focused and effective engagement experience.



Summary

KOL preferences for engagement are constantly changing, and our analysis validates this change.

What's needed is a compliant omnichannel customer experience strategy that empowers medical affairs leaders with the right set of information so that they can develop engagement plans that are focused, dynamic and measurable. To achieve this, objective data should be available for analysis that can unearth source, channel and topic affinity. Organizations need to build and develop the necessary systems to identify, capture and analyze the data needed. Utilizing analytical outputs to develop omnichannel engagement roadmaps and drive a positive customer experience in the right way will redefine the overall go-to-market strategy and set medical affairs leaders up for success in the future.

About the authors



Sunil John is a principal with ZS and co-leads the firm's global medical affairs practice. Sunil has played a key role in building this practice from the ground up. He has authored several articles and white papers on various medical affairs issues, such as medical science liaison assessments, future customer engagement models and using data to define customer centricity for field medical teams. Sunil focuses exclusively on global medical affairs, helping emerging and large pharma, biotech and MPS clients with business strategy, branding, visioning, launch planning and organizational design. He also assists with key performance indicators, deployment, digital strategy and roadmapping, medical insights, cross-functional collaboration and omnichannel engagements for medical affairs.



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