

*“The best way to find yourself is to lose yourself  
in the service of others.”*

— Mahatma Gandhi

## SECRET #10

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### The Ultimate Secret for Elevating Physician CX is for Pharma to Embrace The Pharma Feedback Loop

**S**o that is the story on Physician CX. In 2024, it is time for the pharmaceutical industry to wake up to the fact that for over a decade, they have increasingly been losing access to their physician customers. Consumer companies worry about customer “churn.” *Doctors moving away from “salesmen” is not churn. It is abandonment.* And COVID-19 has significantly sped up this process.

To regain their access to physicians, pharmaceutical companies are going to have to do several things differently.

First, they are going to have to pay a lot more attention to Physician CX than they have in the past. Think of pharmaceutical

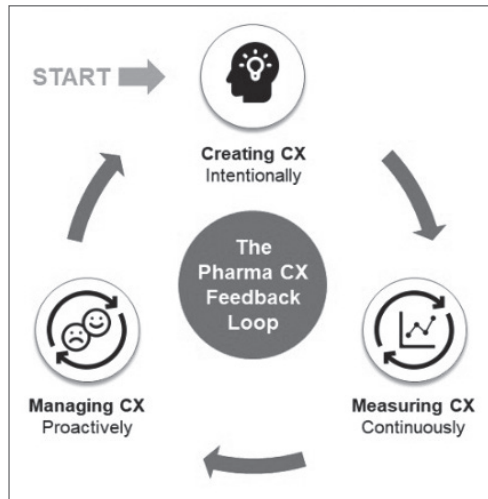
promotion as being a lock and key process, with the promotion being the key and the doctor’s mind being the lock. For decades, the pharmaceutical industry has spent millions of dollars a year researching the key, and very little on researching the lock. That needs to change!

Second, they are going to have to use their increased awareness and knowledge of Physician CX to develop an “omnichannel” approach to physicians, employing both personal and digital channels and relying on both “push” and (increasingly) “pull” activities.

Third, they are going to need to *customize* the approach they take with a physician based on that doctor’s channel preferences, *individualize* their message to the physician based on that doctor’s stage in the Awareness/Interest/Trial/Usage cycle of habit development, and *personalize* their approach to each physician to show that they have serving that individual doctor firmly in mind.

And finally, they are going to have to develop an ongoing research program of applying metrics, like the modified Net Pharmaceutical Promoter Score, to determine how well they are doing in providing a positive CX for physicians, in comparison both with the experience provided by their competitors and with how they themselves have done in the past.

Graphically, the ongoing process needed to make Physician CX a success looks like the Pharma CX Feedback loop, shown here:



As with patients and other healthcare players, Physician CX, done correctly, is a constant feedback loop. The step that requires the most strategic and tactical thinking is the first one, i.e., “Creating CX Intentionally.” What kind of experiences do we want our physician customers to have to make them most likely to be “promoters” of our company while simultaneously optimizing sales of our products? As has been outlined in previous chapters, this is especially challenging since different Physician Engagement Personas want different elements rolled into their experiences.

The second step, “Measuring CX Continuously,” is also crucial, and has been largely ignored by the pharmaceutical industry in its historical approach to physicians. Unfortunately, the general feeling among pharmaceutical marketers has been that it is the features and benefits of our products versus the competition that will generate sales, so the experience of the physician customer with our company doesn’t really matter much. Hopefully, by reading this book and its companion volumes, you will consider the suggested approaches to measuring Physician CX.

The third step, “Managing CX Proactively,” is also essential. Measuring CX is only useful if the results are used to fine tune the cafeteria of approaches we are taking to our physician customers. Regardless of how well our initial experience offerings were thought out, they will likely need to be modified, based on feedback, as physician expectations change over time.

In this world, “return on investment” (ROI) will not be measured entirely in terms of prescriptions written but will also be gauged in terms of CX measurements (e.g., NPPS) which will become the new KPI’s (Key Performance Indicators) in the omnichannel world.

The result of these changes will be a win-win-win. Physicians will feel that they are being better served, patients will receive

more support and pharmaceutical companies will enjoy better receptivity and credibility.

It is an exciting time to be involved in Pharma CX, applying the lessons that we have already learned to our pharmaceutical marketing efforts with BOTH patients and physicians.

## **Getting Started in Physician CX**

So, given all that you have now read and learned about Physician CX, how do you get your company started in the meaningful pursuit of this new and important goal?

Overall, as reflected in the process loop shown in the previous section, there are three major steps in making Physician CX a reality in your company. Let us explore them one by one in more detail.

## **Creating CX Intentionally**

This step requires both an understanding of the needs and desires of your physician customers and the willingness and creativity to respond to them. This step is also the most fun, because the CX Team gets to hear first-hand from its customers what are the positive and negative drivers of Physician CX, i.e., what do doctors like and dislike about what a company is doing for them. Or not doing for them!

The methodology to be employed here is the “Open Mic” conversation that has been discussed throughout this book. Physicians are recruited to participate in a 45-60 minute conversation, conducted by, or under the supervision of a psychologist, which begins by telling the doctor:

“What we need to hear from you today are the experiences that you are having with pharmaceutical companies. What are

they doing that you like, what are they doing that you don't like, and what else should they be doing to provide you with a better customer experience? Please tell me about all of the encounters that you have had with pharmaceutical companies during the past month, and also tell me which you found to be positive and which you found to be negative experiences.”

Results are then analyzed (At PeopleMetrics, we use our “Coder” software) to determine what elements are mentioned most frequently as positive, and negative, drivers of CX.

Although no topical guide per se is used in this kind of research conversation, specific probes are used to determine what companies are drawing the most positive and negative CX, and what factors are contributing to these outcomes.

Although all of that seems straightforward, there's a kicker that makes all of this a lot more complicated. Think back to the PEP's (Physician Engagement Personas) that were talked about in a previous section of this book. Each of those Personas is likely to report very different drivers of positive and negative CX from the others. The Open Door Doc welcomes brief, spontaneous “drop by” encounters with Pharmaceutical Sales Representatives, while such visits would be anathema to the Scheduling Specialist, who grants PSRs substantially longer blocks of time, but only when a visit has been prescheduled. Understanding how such factors as physician specialty, practice setting, and other factors contribute to membership in these PEP's is going to be essential to companies focused on optimizing Physician CX.

## Measuring CX Continuously

As was discussed in the previous secret, continuous measurement of CX is essential for a customer centric company. Essential to understand here are two things. First, how is your company doing against other companies, and second, how is your company doing against its previous performance scores. Subscribing to a relationship survey, such as the one PeopleMetrics offers, allows you to understand the overall customer experience in a timely and cost-effective manner.

It is important to remember that what this survey does is to measure the state of the physicians' overall *relationship* with the various companies. The other kind of CX research, *transactional*, can also be employed to gauge the CX impact of individual "touch points," i.e., specific engagements with various components of the company's promotional support efforts. As with so many aspects of Physician CX, such transactional research needs to be managed very carefully. Translated, that means that if a company were to survey a physician after each encounter she has with a Pharmaceutical Sales Representative, they might get useful information. BUT. They might also annoy the heck out of the doctor being surveyed.

## Managing CX Proactively

This last step completes the loop. Obviously, it is an especially important one, and involves the commitment of the company to DO SOMETHING about the CX research findings. But what?

Two answers are typically offered here by CX experts. First, the results of the continuous measurement can be used to guide modifications of the company's customer experience touch points. Clearly, this is a valid and important use of the research findings.

No controversy here.

But how about the other application of research findings? In many verticals, one of the most important applications of the research findings is to get back to customers who have offered negative comments and “close the loop” to obtain a resolution for any problems that have been encountered at the company’s touch points. In this regard, CX pundits observe that a customer whose complaint has been dealt with successfully often winds up being more positive toward the company than a customer who has not had a complaint.

But what about with physicians? Here we see a situation where providing feedback to the physician indicating that their comments were heard and are being dealt with for future interactions can wind up being a crucial element of the “personalization” process discussed earlier in the book. However, engaging physicians in such follow up conversations will also require additional amounts of their time, which as has been noted throughout this book may result in push back from the time-jealous practitioner. SO? Handle all of this very carefully!

## **Summary with Action Steps**

The ongoing process of Physician CX involves creating CX intentionally, measuring CX continuously, and managing CX proactively. This involves understanding and addressing the needs of various Physician Engagement Personas and continuously measuring and adapting the company’s approach to better serve physicians. Managing CX proactively ensures that companies address any issues and improve their overall relationships with physicians.

The result of these changes will benefit all parties involved. Physicians will feel better served, patients will receive more support, and pharmaceutical companies will enjoy better receptivity

and credibility. The chapter concludes with a guide on how to get started in Physician CX, emphasizing the importance of intentionality, continuous measurement, and proactive management.

**Action Steps:**

1. *Pay more attention to Physician CX.* Prioritize understanding and addressing the needs and preferences of physicians to improve their overall experience with the pharmaceutical company.
2. *Create CX Intentionally.* Understand the needs and desires of physician customers and develop creative ways to respond to them using the “Open Mic” conversation methodology.
3. *Measure CX Continuously.* Apply metrics, such as the modified Net Pharmaceutical Promoter Score, to continuously evaluate the effectiveness of the company’s CX efforts, and proactively address any areas in need of improvement to enhance relationships with physicians.
4. *Manage CX Proactively.* Use research findings to modify touch points and resolve any problems encountered at the company’s touch points. Be cautious when engaging physicians in follow-up conversations to avoid intruding on their valuable time.



5. *Customize, individualize, and personalize!* Adapt the approach based on each physician's preferences and their stage in the habit development cycle. Personalize the approach to show they have the doctor's best interest in mind.