# PHARMA CUSTOMER EXPERIENCE

20 SECRETS TO
10X YOUR CX AND
BOOST PATIENT
OUTCOMES



SEAN McDADE, PhD



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PHARMA CUSTOMER EXPERIENCE

20 Secrets to 10X Your CX & Boost Patient Outcomes

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The book is dedicated to the people who work in pharmaceutical and biotechnology companies. They are now the heroes to the world as they help us get past the COVID-19 pandemic. Yet, for decades they have helped people live better and long lives.

Heroes now and always, thank you for everything you do!

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# INTRODUCTION

More than once, pharma has literally saved the world. As I write this in July 2021, there have been three vaccines approved in the US for COVID-19, one by Pfizer, one by Moderna, and one by Johnson & Johnson.

Another COVID-19 vaccine, this one by AstraZeneca (and Oxford), has been approved in the UK. And there are several more vaccines on the horizon that will help the world get past this pandemic.

Each is doing their part to let us feel hopeful again. Hugging a parent? Going to a ball game with friends? Seeing your favorite band in concert? Yes, yes, and yes!

Pharma is making all of it possible. They should be heroes to the world! And yet, most people are indifferent at best. It's not that pharma companies are faceless brands that consumers can't connect with as they do with Apple, Spotify, and Peloton. But according to The Harris poll, only 53% of consumers hold a positive view of pharma.

And a recent Gallup poll on consumer perceptions found pharma rated *below* electric utilities and oil and gas!

But why?

Because pharma does not emotionally connect with its ultimate customer, the patient, like great consumer brands do. Let me explain.

The best consumer brands are completely obsessed with the customer experience, and the entire company is focused on it. These companies first create each customer experience with intention. Nothing is left to chance. They meticulously map every aspect of the customer experience—from first engagement to first purchase to continued usage over time.

And everything in between.

Everything.

The great consumer brands emotionally connect with the customer. Over and over again.

And they do that by delivering experiences that customers value, remember, and share with others.

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Pharma does not do this. At least not consistently.

But they can. And, more importantly, they must if they want to continue to thrive. Patients who have positive experiences with pharma are more likely to join clinical trials, successfully onboard to new medications, adhere over time, and enjoy positive medical outcomes.

And better experiences provide pharma with the opportunity to connect with underserved populations and help the people in those populations live longer, better quality lives. Put another way, a great patient experience means *all* people have a chance at better medical outcomes and better lives.

Why am I qualified to write about this topic?

The company I founded in 2001, PeopleMetrics, has been working with pharma companies since we started. We have helped pharma understand stakeholders' needs, wants, and experiences.

Up until 2015, most of this work was traditional market research type work, primarily with physicians and other Healthcare Professionals (HCPs)—sales force effectiveness, market landscape, segmentation, message testing, you name it.

And then in 2015, we got a call from a client who asked us

if we had measured the experience with "patient support services"? We asked, "What in the world are patient support services?"

We learned quickly. Patient support services, also known as "patient support programs (PSPs)," are game changers for patients. These services help patients with access to their medication, improve adherence, better manage their disease, reduce complications, provide financial assistance, and more.

Then in 2017, a client asked us if we could help them measure the patient experience in a global clinical trial. This was new and incredibly exciting territory. A better patient experience in clinical trials impacts the ability to recruit and retain patients (including those from underserved populations), informs design for future trials, and provides an indication to the effectiveness of different trial sites.

We started to understand that being patient-centric applied across commercial *and* clinical.

### Hmmm.

At the same time, the customer experience (CX) space was exploding, with nearly every industry embracing the concept and investing heavily to better engage with their customers. There even appeared a new category of software called "experience management," which helps companies measure and manage the customer experience. Analysts like Forrester and Gartner cover this space regularly.

This got us thinking, how does customer experience, or CX as we call it, apply to pharma?

And "pharma CX" was born.

In 2018, I wrote a book entitled *Listen or Die: 40 Lessons that Turn Customer Feedback into Gold*. I wrote that book because customer feedback about their experiences is the foundation for emotional connection between companies and customers.

Indeed, customer experience remains the only true differentiator in most industries.

Yes, even in pharma. Especially in pharma.

This is easily the most important work my company has done or will do.

It is one thing helping a hotel measure and improve the checkout experience or helping a telecom company improve their customer support.

But it's quite another to help a pharma company make it

easier for a new patient who has cancer to get the treatment they need to live a longer and higher-quality life. Or help a pharma company recruit and retain patients for a clinical trial that results in a new medicine that saves lives that can't be saved today.

So, we got to work.

This book is about mindset more than anything else. Specifically, it's about pharma changing its mindset from one focused on developing products to one focused on delivering experiences. I want to shift pharma's approach to model the companies that cultivate not just customers, but advocates and raving fans, over and over again.

I am writing this book to share twenty secrets that my company, PeopleMetrics, has learned in helping pharma companies focus on the customer and create exceptional experiences. Each secret falls within one of four sections.

The first section introduces three secrets that lay the foundation for pharma CX. The second offers four secrets that introduce how pharma CX applies to both clinical and commercial teams. The third section contains ten secrets around patient support services, the front-line for commercial pharma CX. The final section includes three secrets that are key to implementing a successful pharma CX program.

And at the end of the book, there is a bonus section, which takes a peek into the future.

Let's dig in.



# WE'RE IN THE FIRST INNING

The secrets in this book are only the beginning; there are opportunities to extend pharma CX to better understand and proactively manage the full patient journey.

It's common to hear that healthcare is the next frontier for the customer experience. My view is that pharma has the largest opportunity in the healthcare arena to impact patients' lives through better experiences.

There is a lot to learn from how CX leaders in other industries have gotten closer to the customer and created strong, emotional bonds. It is important for pharma to apply lessons learned.

Although pharma faces regulatory barriers that traditional CX leaders do not, the opportunity to create experiences for their customers—patients and HCPs—that are not only memorable but can extend and save lives is incredibly important. In fact, it is far more important than, say, a more comfortable stay for a guest at a hotel.

The purpose of this book was to challenge pharma leaders to think differently about their business. To think beyond products to experiences. To change their mindset. As a result, the secrets in this book were primarily focused on two experiences that pharma can immediately impact—the clinical trial experience and the commercial patient support services experience. There is so much work to do in these two areas, I decided this was an appropriate place to begin.

However, managing the full patient journey goes beyond these touchpoints. For example, consider patient interactions with HCPs. Does pharma control these interactions? No. Do they need to know about them and make the patient journey a better overall experience? Absolutely! How about HCP direct interactions with pharma, either through sales reps, digital engagement technologies, or conferences/symposia? All these experiences can be created with intention, continuously measured, and proactively managed!

There can be a reluctance at pharma companies to embrace pharma CX. What's required is a fundamental change in

mindset, and for an industry as successful and impactful as pharma, change is hard. But it's necessary. And pharma's incredible speed and agility in creating multiple vaccines to combat a worldwide pandemic proves the industry more than has it in them!

You may hear objections such as, "We don't want to hear about any experiences that we don't own," or "That's not our department." That mindset can come from a reaction to regulatory overzealousness, aversion to risk, or a reluctance to cause a potential stir by collecting negative feedback. You should look to break this mindset down, as there is a real risk to not embracing pharma CX.

The truth is, by the time patients reach your clinical trial or your patient support team, they have been through a tremendous amount of stress, and you have the opportunity to lessen their burden. Taking care to support the patients you rely on goes a long way toward forming the emotional connection necessary to attract and keep customers.

Patient support teams face challenges to the patient experience beyond what has been covered in this book. How is the patient's experience with their HCP? How is their pharmacy experience? Are they satisfied with third-party patient advocacy networks that they participate in? Are they participating and getting value from patient events run by other teams? Are nurse educators giving them proper

assistance and education on their therapy? What experiences do underserved populations expect, and how do we deliver these to them?

Moreover, to get true real-time feedback on the patient experience in patient support services, pharma needs to look beyond surveys. Needs assessments are becoming popular, which are shorter, more conversational, and happening at the touchpoints the staff has with patients. As this data from patients is gathered, they are entered into a CRM, enabling pharma to tailor future experiences to the individual patient.

All these experiences are points in the patient journey at which a patient can have a poor experience, and they may reach out to their support services team for assistance with these issues. Patients do not have a detailed understanding of who owns each of these interactions They generally see their support services team as broadly able to help them with their needs. So, if they have an issue along their patient journey and all they hear from their support team is "We don't deal with that" or "That's not us," they feel unsupported, which puts them at risk of improper adherence.

The more your patient support services teams know about the full patient journey, the better they can serve the patient. Pharma companies should ask why patient support teams are often isolated physically from the brand teams with which they're expected to work. A tighter integration between these teams will result in a better experience for the customer (with, of course, the appropriate data firewalls and regulatory compliance).

# WE ARE ALL IN THIS TOGETHER. DON'T HESITATE TO REACH OUT!

We are at the very beginning of pharma's journey into creating, measuring, and managing the experiences of their customers. The pharma clients we work with are beginning to think of experiences rather than just products, as is the industry at large.

No one has this completely figured out, and we are all in this together. I am inspired daily by the courage of our pharma clients to rethink how they can better serve their customers, and I hope there is something in here that inspires you to create better experiences for your patients.

I am so excited that pharma is embarking on this journey!

If you're ready to take the next step to improve your pharma CX, and we can be of service to you or your organization in any way, please reach out. My contact information is below, along with a contact number for PeopleMetrics.

We've also got great resources for you to learn more. Our

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blog has been recognized as one of the top in CX. You can

subscribe by heading here:

https://www.peoplemetrics.com/px-blog#/

I also host a live webinar every two weeks on Tuesdays at

2:00 p.m. (EST) called PeopleMetrics Live! I encourage you to join us as we do a deep dive into CX and pharma

CX topics.

Thank you for taking the time to read this book and learn

more about pharma CX. I wish you all the best in your

journey toward patient-centricity and creating exceptional

experiences for your customers!

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## **ABOUT THE AUTHOR**

**SEAN MCDADE** has been helping companies optimize customer experiences for over twenty years. He is the founder, CEO, and visionary of PeopleMetrics, a leading provider of experience management software and advisory services. Sean has worked with leading pharmaceutical and biotechnology companies such as AstraZeneca, Sanofi, and Novartis. He has created PeopleMetrics pharma CX solutions, including the Patient Hierarchy of Needs framework for patient support services that is featured in this book. Sean's first book, Listen or Die: 40 Lessons that Turn Customer Feedback into Gold, was an Amazon bestseller. He holds a PhD in Business Administration and Marketing Science from Temple University and has published eight articles in peer-reviewed scholarly journals. A recipient of Philadelphia Business Journal's 40 Under 40 award, Sean is also an active angel investor in the Philadelphia region. Sean resides in Philadelphia and spends as much time as possible in Brigantine, NJ, during the summer with his two sons, Ben and Henry.