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With a plethora of obstacles to overcome —

partner to physicians.

FROM BUSY DOCTORS TO MEDICARE TO

REIMBURSEMENT — the sales rep of the future will not only need knowledge of the product and disease state but will need to be skilled in the art of relationship building and must become a true

Steven Budd PDI Inc.

he model of putting a certain number of well-delivered messages against a certain audience has worked for a long time, BUT NOW IT'S ALIENATING CUSTOMERS BECAUSE THERE ARE JUST TOO MANY REPS CALLING ON PHYSICIANS WITH THE SAME PRODUCTS.

he pharmaceutical marketplace is laden with challenges, and it's only getting tougher. For the sales rep on the front line, navigating the issues — Medicare Part D, reimbursement, importation, and client interactions — requires a new level of skills. The onus is on the reps, their managers, and the entire organization to deliver true value to the customer.

"The continuing changes in guidelines and compliance issues mean the successful sales organization of the future will need to tie compliance guidelines, OIG, and PDMA guidelines, and so on into the whole aspect and fabric of how it builds, trains, and maintains a salesforce," says Terry Herring, CEO of Ventiv Commercial Services, a division of Ventiv Health.

Moreover, the pharmaceutical company sales representatives' clients, the physicians, are busier than ever and increasingly are becoming more critical of some sales rep behaviors.

A recent article from the *Journal of the American Medical Association* (JAMA) raises concerns about the current relationship between physicians and pharmaceutical sales representatives. According to the article, "conflicts of interest between physicians' commitment to patient care and the desire of pharmaceutical companies and their representatives to sell their products pose challenges to the principles of medical professionalism."

According to the JAMA article, efforts to self-regulate with regard to gift giving have not gone far enough, and stricter controls are needed, including "the elimination or modification of common practices related to small gifts, pharmaceutical samples, continuing medical education, funds for physician travel, speakers bureaus, ghostwriting, and consulting and research contracts."

VOICE



TO HAVE TO PARE DOWN
SALESFORCES and ensure that
reps are well-educated in their
disease states and are providing
real value to clinicians.

"There's an element of neutrality that needs to come into the interaction between doctors and pharma reps," says Stefania Nappi, CEO of PreferredTime. "The choice of who gets to see who, when, and how frequently needs to be far more neutral than it was 10 years ago when some companies had money to take a doctor to Hawaii and others didn't."

According to Thomas Ebeling, CEO of Novartis Pharma AG, creating value for doctors and patients will be key to the success of the pharmaceutical industry in coming years.

"It is imperative that we continue to find ways in which we can increasingly enhance our interactions with patients and doctors to provide solutions to healthcare problems in a meaningful way," Mr. Ebeling says.

Taking a long-term view of the value of the customer is imperative, says Larry Somerville, VP of sales at Otsuka America Pharmaceutical Inc. (OAPI).

"The goal is to understand the needs of each customer and ensure we deliver the best healthcare options to that customer," he says. "A more value-based approach is important because, let's face it, the industry can't contin-



NE OF THE
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ue the strategy of increasing share of voice just by bringing in additional representatives. That's not an optimal strategy."

Building Partnerships

In an industry beset with challenges, the relationships that the company builds — with its customers, partners, and so on — are vital. It is the relationships, experts say, that differentiate a company from the competition.

"The ultimate differentiator is the degree to which a pharma rep can build a strong, trusting relationship with the physician over a period of time," says Bill Jackson, executive consultant at AchieveGlobal. "There is still too much of an emphasis on presenting the features and benefits of a product and not enough placed on building the capacity to influence by building the strength of the relationship."

Given the financial, regulatory, and time pressures that physicians face, Ms. Nappi says it's understandable that doctors want to control the way they interact with pharma companies.

"What everyone wants, doctors included, is to be asked how they would like to do business," she says.

The first priority is the caliber of the reps that companies hire. Physicians are looking for information and education.

"We have to make sure the sales reps that are being hired are experienced, mature, and credible and that they really understand the industry and the challenges doctors are facing," says Susan Stein, CEO of Connexion Healthcare. "It's not just about scripted product features and benefits; it's about truly knowing the individual needs of the customers."

According to Tim Gipson, director of sales, East region, at OAPI, the company makes a point of ensuring the reps they hire have strong communications skills.

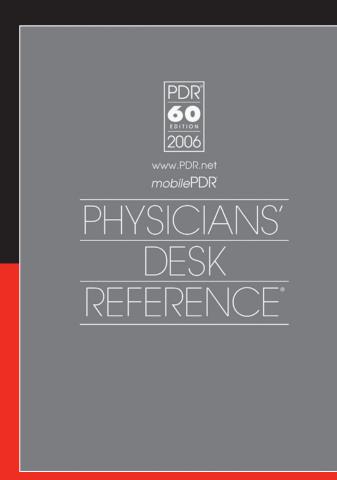
"During the interview process, one of the benchmarks we set for hiring representatives is their ability to clearly communicate scientific information; that's a critical element of their basic skill set," he says.

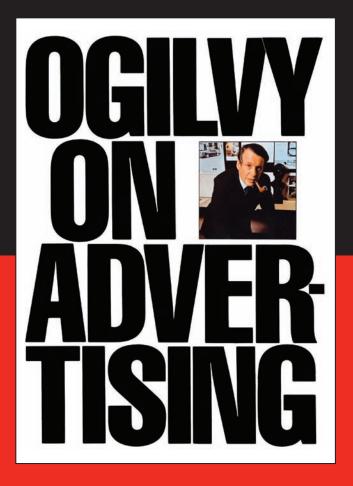
Experts say the industry as a whole needs to rethink how it trains reps. Mr. Jackson says sales trainers, managers, and leaders still encourage reps to go in with their detail books and sales collateral and present information to the doctor, even though they've done nothing to earn the right to make any recommendation to those physicians in terms of how they should be caring for their patients.

"The industry has trained doctors to mistrust and disrespect the pharmaceutical representatives by not giving the reps the skills and tools to build mutual respect," he says.

Instead, he says, leaders need to do a better job of training reps on what exactly is the nature of a relationship and how to proactively build the capacity to influence behavior.

"A relationship is based on four characteristics: trust, respect, rapport, and the perception of mutual value," Mr. Jackson says.





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"There are variables associated with different stages of a relationship, from the beginning where the focus should be more on building trust and respect — to where it's growing, to

MORE VALUE-BASED APPROACH IS IMPORTANT BECAUSE THE INDUSTRY CAN'T CONTINUE THE STRATEGY OF **INCREASING SHARE OF VOICE JUST BY BRINGING IN ADDITIONAL REPRESENTATIVES**; that's not an optimal strategy.

when it's mature when rapport and adding value come into the mix. It's a conundrum to me that companies that are part of the healthcare and medical industry haven't done a better job of understanding the science of human relationships."

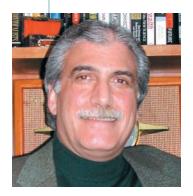
Mr. Somerville says OAPI places an emphasis on training and edu-

cation of its representatives and on ensuring the representatives execute the tactical plans established by the company.

"We ensure the reps understand who the customer is, and then we train them on the product and the disease state for which it is approved, but we also ensure they understand the customer segment," he says. "Most importantly, representatives are trained, and required, to strictly adhere to the company's compliance program and policies."

In addition, Mr. Somerville says it's important that representatives understand the different channels in which the company operates, be that hospital, retail, or long-term care, as well as the different referral networks physicians use.

IDENTIFYING AND OVERCOMING SALES CHALLENGES



Jeffrey Zornitsky Senior VP, Sales Performance Optimization TNS Healthcare

TNS Healthcare research shows that JUST 27% OF SALES VISITS RESULT IN THE REP SEEING THE DOCTOR AND DISCUSSING A PRODUCT.

Pharmaceutical reps have a tough job. They are pressured to improve productivity. But achieving that goal depends on seeing doctors; and increasingly, physicians resist providing the access needed to drive sales. In fact, TNS Healthcare research shows that just 27% of sales rep visits result in the rep seeing the doctor and discussing a prod-

What can pharma companies do differently to resolve the access challenge? The answer lies in shifting their focus from the sales process to the sales driver: the physician. This is not just a matter of relationship selling skills. It's a matter of identifying the specific actions required to configure the optimal sales experience for each doctor. Without that insight, it's difficult to allocate resources appropriately — or provide the kinds of support that builds lasting relationships.

How can companies move from process-centric to physician-centric strategies?

There are three steps:

- 1. Adopt relationship metrics, measure them continuously, and push them down to the regional, district, and territory levels where the front line can act on them.
- 2. Understand physician preferences, and work to deliver those experiences with the highest quality.
- 3. Create a climate of accountability for managing relationships that extends from the head office down to the local level. Incorporate relationship metrics, such as commitment, into the evaluation processes. Studies show that increasing commitment more than doubles patient share, so it's essential that activities focus on that objective.

Developing effective reps depends on giving them the skills to deliver the experiences that strengthen relationships. The result will be the increased commitment that improves productivity.

Source: TNS Healthcare, London. For more information, visit tns-global.com.



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"For example, with a cardiovascular product the physician will refer patients to a certain cardiologist or a certain medical center," he says. "So we train reps on that aspect of referral networks, as well as on understanding the customer's professional affiliations."

To meet the needs of customers, Steve Budd, president of PDI Inc., says it's likely that the industry will move more toward a fit-for-purpose organization. Future salesforces will be comprised of multiple rep profiles, each with a different role and mission.

"The one-size-fits-all profile, where multiple identically equipped reps are deployed against primary-care offices, needs to change," he says. "Field forces need to more closely adapt their approach to what physicians and their staffs really need — recognizing their needs varies depending on where the product is in its life cycle and the degree of experience that the physician has with the brand."

A greater degree of salesforce stratification is inevitable, Mr. Herring says.

"There will be representatives who, for example, may just focus on customer service in an office; there will be representatives who will be focused on a high level of business acumen; there will be representatives who will be technical experts; there may be more nurse educators to help advise on the more complicated products," he says.

Knowledge of the disease state and providing quality information is important, and that is starting to happen, Ms. Stein says.

"The industry is going to have to look at paring down salesforces and ensuring that reps t's a conundrum to me that companies that are part of the healthcare and medical industry **HAVEN'T DONE A BETTER JOB UNDERSTANDING THE SCIENCE OF HUMAN RELATIONSHIPS.**

are well-educated in their disease states and are providing real value to the clinician and not just selling from visual aids," she says. "Right now we're sending multiple reps in with a single product, and doctors are certainly frustrated with that. Clinicians are interested in managing their practices efficiently and improving patient care. Reps need to be armed to help practitioners do that by being knowledgeable about major healthcare issues: Medicare

Part D, reimbursement, drug importation, and all the other concerns that patients have. Although the clinician's time has become increasingly less available, reps can still provide quality, science-based information that the doctor will value. This will help build not just business but relationships."

At OAPI, efforts are made to ensure reps are aware of changes in industry dynamics, industry trends, and important issues within the therapeutic classes.

"With all the different factors that impact the day-to-day selling process — from managed care to guidelines of many types — it's critical the representatives understand not only the science but also the regulatory and legal guidelines within which we operate," Mr. Gipson says.

Prescribers are looking to us to provide important medical information about our products, he says.

"Doctors want a valuable and reliable resource they can turn to, not only for product information, but for disease-state information, and information about issues such as Medicare modernization, which is going to have a huge impact on the industry," Mr. Gipson says.

Reducing representative turnover also is critical, many in the industry agree. OAPI has worked to minimize turnover, and, according to Mr. Somerville, the company has a turnover rate of around 11% to 12%, compared with an industry average of around 18%.

"The goal is to retain highly skilled professional representatives in whom the company has invested heavily in training, in scientific and selling skills, as well as corporate compliance standards," Mr. Somerville says. "Retention of a highly skilled, well-trained salesforce also maintains our credibility and reputation with our customers in the medical community."

Measuring Quality

Tools, such as learning-management systems, exist to assess knowledge and competency levels of sales representatives. Experts say these online training and development programs can be used to measure whether a salesforce's level of understanding of key issues is impacting their customers, such as their appreciation of the nuances of a particular office or the impact of managed care in a particular region.

"Online training-development programs measure over time how field forces are growing in their knowledge and competency base," Mr. Budd says. "It's a very efficient way to provide targeted, ongoing training and development that would help the sales people to expand their capabilities and their competency level."

A 2003 survey conducted by Accenture found that customized content, clinical evidence, and comparative analyses of medicines top physicians' wish lists when it comes to visits from pharma reps.

Mr. Herring says message recall offers some valuable insights into evaluating the messages that physicians are receiving.

"It enables companies to evaluate the effectiveness of the message and determine whether the call was prompted or unprompted," he says. "It also allows companies to assess whether the message is compliant, in other words, are the physicians hearing an appropriate message, one that is not out of context with indications and so forth. And it determines how physicians are interpreting the messages they're receiving and how that message is being relayed to the patient."

One thing that needs to happen, Mr. Budd says, is for surveys to provide information about the individual practices.

"If we're serious about differentiating the quality of our reps and building ongoing relationships that generate long-term support for our brands, then we need to find a way to





HE VALUE CREATION HAS TO COME FROM HAVING THE NEWEST DISEASE AND DRUG INFORMATION, DEVELOPING NEW MEDICINES, HAVING NEW SOLUTIONS TO TREATMENT PROBLEMS, as well as the reps' ability to deliver all of this to doctors in a way that is efficient and useful.

assess how we are measuring up in the physicians' minds and their staffs' minds in terms of the quality of the services that we're providing," he says.

There is a push toward office surveys where the physician's office provides feedback about the representation they're getting and what they'd like to see, Mr. Herring says.

"That feedback might lead a company to an evaluation of the ROI of a district and



MEASUREMENT OF HOW A
COMPANY CAN IMPACT
PHYSICIANS IN A PARTICULAR
COMMUNITY OR REGION versus
the obstacles they face in that region
and what the return will be.

whether instead of having one manager and 10 reps, it might be more valuable to have one manager, two medically trained professional reps who are the key contacts for clients, a group of customer service reps, and a nurse educator," he says.

A customer satisfaction survey that measures the doctor's percep-

tion of the strength of the relationship and the respect for the sales rep would be helpful, Mr. Jackson says.

Experts say the benchmarks should be established by the incremental successes and effectiveness of the reps themselves.

"Reps have to do more than just show doctors something that's written by Madison Avenue and expect to get a return," Ms. Stein says. "Doctors don't want to feel like they're being sold; they want to be educated. The reps who can provide a consultative sell and consultative value will be successful. Those are the reps who are successful now, and those are the reps who the doctor will see."

Continuously adding value is the only way to strengthen relations between physicians and reps, Mr. Ebeling says.

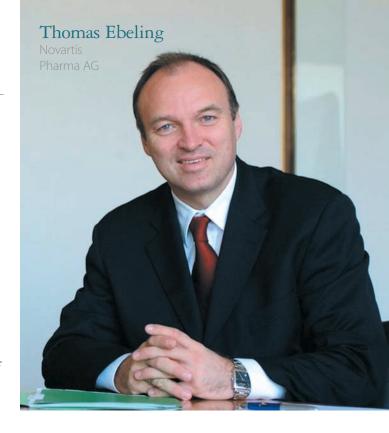
"The value creation has to come from having the newest disease and drug information, developing new medicines, having new solutions to treatment problems, as well as the reps' ability to deliver all of this to doctors in a way that is efficient and useful," he says. "Unless we are able to do all of these things, it will be difficult to not only prove the value of sales reps, but for the company to sustain growth and deliver on our mission to fulfill the unmet needs of patients."

Compensation Plans

Since pharmaceutical companies must pay heed to the bottom line, sales-rep compensation inevitably will always be results driven.

Those with expertise in the industry say it is equally important to tie incentive compensation plans to the behaviors companies want their reps to emulate.

"If we're saying as an industry we want to build stronger and longer-term relationships,



and if we were to be able to measure physicians' impressions of the level of service that we provide, then shouldn't some aspect of the incentive compensation be tied to the reps' ability to build those strong relationships?" Mr. Budd says. "The challenge is how to measure that."

Mr. Herring says there will likely be a shift in the way performance is measured, with less focus on total scripts and revenue and more focus on maximizing the relationship in a given environment.

"There will likely be more and more measurement on how a company can impact physicians in a particular community or region versus the obstacles they face in that region and what their return will be," he says. "I think that will cause the sales leadership to make more efficient decisions versus just throwing more reps at the issue."

Experts in the field note there already has been a shift at some companies in this regard, with several implementing incentive management schemes, such as expense management or enterprise incentive management programs and, particularly at smaller companies, building their sales teams in a more flexible way.

According to IBM Healthcare and Life Sciences, variable pay incentive compensation is increasingly being seen as a powerful tool for driving business success and motivating the salesforce. Therefore, it has grown in popularity in the United States, with the percentage of U.S. workers receiving variable pay more than doubling during the 1990s alone.

On a short-term basis, OAPI provides incentives that support achievements of the company's goals, Mr. Somerville says. In addition, it also provides incentives to support OAPI's mission of lifetime value.

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Sound Bites from the Field

PHARMAVOICE ASKED CONSULTANTS TO THE PHARMACEUTICAL INDUSTRY TO DISCUSS SOME OF THE MOST PRESSING CONCERNS FACING THE PHARMA SALES REP OF TODAY AND HOW REPS AND THEIR MANAGERS SHOULD RESPOND TO THOSE CHALLENGES.



STEWART ADKINS is a Pharmaceutical Analyst at Lehman Brothers, New York, which serves the financial needs of corporations, governments and

municipalities, institutional clients, and high net worth individuals worldwide. For more information, visit lehman.com.

The key thing is to make sure that all promotional activities are logged by the rep by territory and by date. Second is to ensure that activities are properly defined, so that differences between appointment calls and follow up calls, GP calls, nurse calls, group meetings, group lunches, spec calls, hospital calls, and so on are all separately identified. This necessitates an up-to-date CRM system that is robust and filled in with discipline. Once this has been established then the database can be analyzed routinely to identify the realized, as opposed to idealized, strategies pursued within the salesforce or forces. ROI can be calculated for each strategy — pattern of calling behaviors — and the sales manager can be presented with data that show which salespeople are underperforming and why. Managers should conduct regular analysis of the database and implement appropriate corrective training for poorer performers. This presupposes that the product message and brand image are strong and/or appropriate for the product. This raises an issue of corporate reputation, which individual reps and managers can influence, but the fundamental tone must be set by senior management at the board level. Thus, I believe that in all its activities — from R&D, sales and marketing, manufacturing, employment policy to corporate philanthropy — senior management delivers a message to all stakeholders. Mess up one of these and the willingness of physicians to trust the company and even its brands starts to reduce.



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strategy, operations, and execution. For more information, visit zsassociates.com.

In today's environment physicians have precious little time to waste on interactions that do not deliver value, and they have many other places they can go for information. So the pressure that pharmaceutical salespeople feel is immense. Some customers have become jaded and even skeptical of the motives of sales representatives. And as customers restrict access, salespeople understandably become ever more insistent on reaching them and, not surprisingly, this only adds to the frustration felt on both sides.

To break out of this downward spiral likely requires a change in the customer interaction model. As that awareness has been building over the past few years, we've seen many creative ideas emerge. These ideas are now being piloted by pharmaceutical companies both in the United States and in several European countries, such as the United Kingdom and Italy. And although some of these pilots represent incremental, and therefore less risky, evolution, others have the potential to be truly transformational for the industry if implemented on a large scale.

The challenge for salespeople and especially for sales management involved in these pilots right now is how to measure the impact, how to know with some degree of certainty that they offer real advantages for the future over the model that is present today. Some models offer such a departure from the way we interact with customers now that they require new roles to be developed, a different support infrastructure and new capabilities people, processes, and tools — that do not exist in pharmaceutical companies today. That makes a pilot a pretty big commitment. In addition, for some pilots, new metrics are required to guide execution and establish best practices. Taking all of this into account then it is not surprising that a true test of some of the most appealing concepts is proving to be difficult to achieve and that the impact of many pilots is unclear.

For pharmaceutical salespeople today this means that, unfortunately, there is as yet no confirmed silver bullet. There are merely a host of good ideas, each with its own risks and potential upsides. What can be said at this point is that the company that is first to identify and then implement a significantly more effective and more

efficient customer interaction model will be poised to benefit from a first mover advantage. The jury is still out as to who that will be, but interviewing customers and speaking to salespeople in the field it is clear that some front runners are emerging.



BOB DAVENPORT is VP of Sales Force Effectiveness Consulting at Hay Group, Philadelphia, a global management consulting firm. For more information,

visit haygroup.com.

The current healthcare environment has certainly taken some of the luster off of the "traditional" pharma sales rep job. It is challenging reps to be relevant to their physicians — and managers — in terms of providing true value and recognizable performance.

Sales management can help meet the relevance challenge by better focusing and equipping their reps. This is achieved by a reorientation of motivation and capability processes. For example, a response could be the implementation of ruthlessly clear and simple sales compensation programs that focus rather than distract behavior as is common in all too many of today's algorithm monsters. Another could be the determination of the truly differentiating capabilities that assure relevance, such as business acumen and building partnerships and building rep selection and development programs on those core precepts versus the all-too-common competency laundry lists found in many training and development departments.



JEAN MALE is CEO of Emp-Higher Performance, Mt. Laurel, N.J., a biopharma sales-performance consulting, keynote speaking, and training firm.

For more information, visit emphigher.com.

The most pressing concern facing pharma sales reps is face time. Nothing can persuade and customize benefits like personal selling.

Without access, it's tough for marketing to justify its most costly promotional line item, the salesforce. Virtually every prescriber has a few 'back-door reps' who initially gain access because they are liked. They aren't signature collectors, and they keep their foot in the door because they are willing to do the legwork and brainwork to identify and deliver value. We have an opportunity to overhaul how we hire, train, and retain those who are willing to do the same. To start, quantify 'face time' and benchmark the values and critical success factors of high performers in your therapeutic area and company culture. Armed with that information you then hire the qualities that cannot be trained and train to the identified critical success factors (CSFs). Gaining access means we must evolve beyond rote technical, selling skills and messaging focus. The best knowledge and skills are useless without access. Training on relationships; influence; social styles persuasion; and identifying, articulating, and delivering value are vital to field sales survival. Build in the CSFs of your high performers as you train reps to act as territory CEOs and reward them for running their territories like small businesses. These practices are proven to expand access, grow business, create trust, and earn respect — all of which are sorely needed by industry and our stakeholders.



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Pharmaceutical sales representatives today is having the ability to take on the role as trusted advisor to their customers. Regulatory, reimbursement, and trust issues are just a few of the business aspects that sales representatives might be able to impact. Life-sciences companies are working hard to build trust back into the industry, and, as the face of these organizations, sales representatives will have to differentiate the value that they bring to healthcare providers and their patients. Positively impacting sales effectiveness will be critical for every organization. There are at least three

characteristics that will help differentiate sales representatives moving forward: a representative's ability to be more distinctive with his or her messages, more relevant in aligning value to a provider's/patient's individual needs, and more consistent in the eyes of the customer.

Representatives who are empowered to deepen the quality of their customer calls will enhance opportunities to develop critical customer relationships, which in turn will grow the base of committed advocates.

Thinking about how some of the industry challenges will not only impact their business but also how these changes impact customers, will give representatives the insight required to answer critical customer concerns or questions. Developing skills in consulting, versatility, influencing, differentiation, innovation, and new approaches to critical thinking will help prepare representatives for their expanded and yet evolving roles. To impact the alarming fact that about 15% of all sales calls result in detailed discussions with providers, not only must representatives shift their approaches, but they must also create a paradigm shift in the minds of providers, thus enhancing their expectations of the value to be delivered by sales representatives.

Sales managers must incorporate an integrated approach to supporting the two sides of their leadership role: leading or managing the sales process by supporting sales representatives in executing the entire sales process and leading the sales representative or sales team by creating an empowered work environment that will encourage and sustain improved sales performance. Coaching representatives to take personal accountability for achieving their goals and individual success helps to create effective and winning sales teams.

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Much like the key opinion leader work that is ongoing for managing relationships in the medical community, sales reps and their leaders may need to consider using relationship-action plans to better target physicians. These plans can establish overall benchmarks that judge relationship health and include strategies to elevate relationships to the next level. Even more important is a long-term view by sales leadership. When reps are compensated based on the number of prescriptions today, they may choose to engage in behaviors that are either short-term focused or

noncompliant. A long-term view by leadership, and the resulting effects on reps, would help to increase sales in the long run. This would include not only rewarding the 'what' (prescriptions), but the 'how' (the behaviors and values that drove prescribing behavior).



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delivers a flexible menu of sales and marketing services. For more information, visit quintiles.com.

One of the most pressing concerns facing today's pharma sales reps is the declining access to and face time with physicians. The financial and time pressures on physicians require that they increase their productivity, which means they are limiting their availability to those sales representatives who bring value and who offer opportunities that enhance the physician's ability to deliver high-quality patient care. Restructuring traditional pharma sales models by adding clinical educators to fieldmarketing strategies improves many critical aspects of patient care. Patients and doctors deserve more than multiple waves of sales reps. They are seeking better understanding so they can make informed decisions, especially in disease areas that are underdiagnosed or undertreated and where advances in drug therapy may require additional education.

The use of clinical or nurse educators is particularly effective when a pharmaceutical company is launching a new medicine. Coupled with sales reps, the clinical educators are able to educate the physician and nursing staffs about the new therapy and thus increase awareness. Adding clinical educators to a field-marketing strategy provides practitioners and their staffs with information they need to facilitate diagnosis, improve treatment regimens, and enhance patient compliance and outcomes. And patients benefit through better understanding of their disease states and the importance to their treatments and compliance.

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"It's important to create a plan that recognizes representatives for their efforts," he says. "While we clearly use some of the traditional metrics — prescription volume and market share — we also try to factor in marketplace

EPS SPEND SO MUCH OF THEIR EFFORT TRYING TO JUST GET IN THE DOOR that they don't have much left when they get in front of the provider or practitioner.

dynamics that could negatively impact reps, such as changes in managed care or government plans, and take those factors into account. Compliance with company policies is a requirement for all plans. We also provide representatives with an open forum to provide us with feedback on the plan."

According to Mr. Jackson, in the early part of a sales representative's career, compensation could be tied to a rep's ability to build relationships.

"That would have to be based on a manager's observations or from a survey of a sample of physicians," he says. "After the two-year point in a rep's career, however, the existing compensation system is probably a pretty fair measure."

Compensation, though, must flow from a change in the way reps interact with doctors,

Mr. Ebeling says. It is important to adjust the mindset from simply focusing on prescriptions to fully understanding the needs of doctors and patients and serving them in a way that addresses these needs.

"As the role of sales reps continues to evolve, I believe the way they are compensated will change as well," Mr. Ebeling says. •

PharmaVOICE welcomes comments about this article. E-mail us at feedback@pharmavoice.com.



Experts on this topic

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