

BY TAREN GROM

A man in a dark suit and tie stands in a garden. In the background, there is a large fountain with multiple water jets. The scene is outdoors with greenery and a clear sky.

# THE MAN THE MISSION THE MESSAGE

He started as one man with a mission five years ago. Today Michael Pucci is inspiring legions as one of the industry's staunchest advocates as he strives to improve the image of pharma with a message based on science and solid data.



It started with a vision; it's become an obsession. Michael Pucci is passionate about transforming the conversation in the pharmaceutical industry to one based on the value of medicine. And he's willing to talk to anybody who is willing to listen — believers and critics alike.

Mr. Pucci has proven to be the right man for the right job at the right time. Capitalizing on his background in science, education, and sales training he took on the role of VP of external advocacy five years ago at GlaxoSmithKline with the intent of stemming the tide of negative press directed at the life-sciences industry and its leading companies and turning conversations into transformative dialogues that make a difference to employees and patients. And he hasn't looked back since.

Believing he has been granted a rare gift, his mission is to help improve the reputation of the industry with the rank-and-file employees across the country and raise the industry's visibility with the public. He empowers pharma employees to have meaningful dialogues with neighbors, friends, family, as well as consumers, lawmakers, patients, and other stakeholders rather than having the messages disseminated as truncated sound bites by the traditional media — print and TV.

"The idea is to educate and mobilize the employee base and train them to speak to the top three or four questions that people have about our industry, how we operate, and why we do what we do," he says. "We also want employees to be able to speak to local community groups. By doing this we can raise our visibility and become human to the general public and consumers. And, through that candor, hopefully we can generate a better and broader understanding of what it takes to discover and develop a medicine, how long it takes, the amount of money it takes, the risk associated with the effort, and ultimately why medicines are the best value in healthcare and how medicines can actually reduce overall healthcare costs and be part of the solution of rising healthcare costs."

Mr. Pucci says there wasn't one cataclysmic event that shaped his future, rather it was a series of tremors that began to crack the industry's reputation and image that led him to make a major career and life change.

"At the turn of the decade, there was so much negative press about the industry and very little visible response from its

leaders that it became very clear to me that we needed to try a different tactic, a different strategy, to begin to raise our visibility with the public," he says. "I had been running the sales-training function at GSK for 10 years, and I was ready to make a change. As I was soul searching to find out what I wanted to do with the next phase of my life I saw an opportunity where I might be able to help give back to an industry that has been very good to me."

With that in mind, Mr. Pucci and several colleagues presented a proposal to Chris Viehbacher, who at the time was president, U.S. Pharmaceuticals, at GSK. (Mr. Viehbacher is currently president, North American pharmaceuticals, GSK.) The idea was to repurpose the framework of a previous GSK program that promoted the value of medicines and relaunch it as a new program with more substance and backing.

"I wanted to reinvigorate the program, put some people behind it, and provide them with the tools to go out and speak publicly," Mr. Pucci recalls. "My proposition was to engage people, incentivize them, and put a lot of effort behind the strategy. Chris, who is a terrific leader, a visionary, and a practical guy, basically said get out there and get out there yesterday. We need all the help we can get."

More than five years and 700 presentations later — some training-based, but all educational — Mr. Pucci along with Dan Weston, who works alongside him in external advocacy, are starting to see the needle move.

"Here we are in 2008 and we have a network of 800 value-medicine champions within GSK who are trained to deliver messages in casual conversations, as well as give presentations about the business," he says. "To date, we've probably reached more 50 million Americans in a very personal way."

When Mr. Pucci says we, he means himself, Mr. Weston, as well as all of those at GSK who support him in his tireless efforts. He also means we as in the industry. It's hard to tell sometimes where Mr. Pucci ends and the industry begins. It is in this vein that he is very careful and quick to point out that his efforts, while highly regarded and generously supported by GSK, are not about improving the image of his company alone but the industry overall.

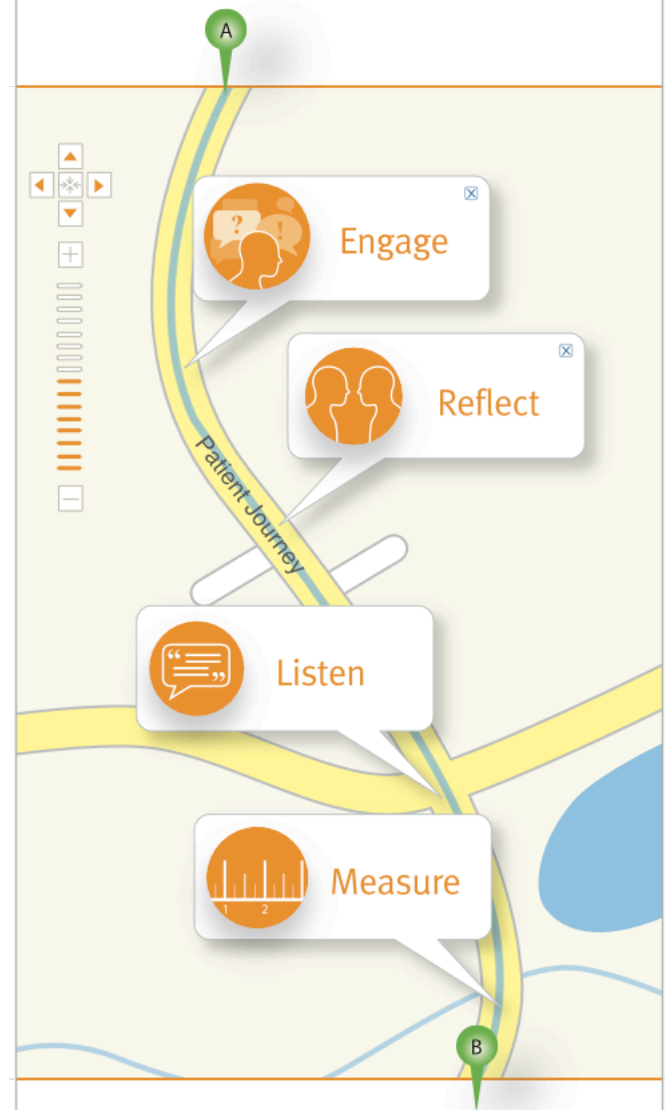
"As the old John F. Kennedy saying goes 'All boats rise with the tide,'" he notes.

In fact, the Pharmaceutical Research and Manufacturers of America (PhRMA) has adopted a nonbranded version of Mr. Pucci's "Value of Medicines" program and has the information posted on its site.

"The most important thing, in my opinion, is that PhRMA, as a neutral source, has made the materials available to member companies,"

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he says. “We all have to stand down and not worry about who takes credit; we all have to be advocates for the future of our industry.”

In addition, the industry trade organization is piloting a new campaign called “We Work for Health” in the Delaware Valley region. (For more information about the program, which is aimed at educating, engaging, and activating PhRMA member company employees on the issues important to the industry, please visit [weworkforhealth.org](http://weworkforhealth.org).)

“The focus is on training all of the industry’s employees in this region, about 200,000 people,” he says. “Many major pharma companies — Pfizer, Sanofi-Aventis, Merck, J&J, GSK, AstraZeneca, etc. — have their headquarters in the New York, New Jersey, Penn-

sylvania, and Delaware area. It’s not just the 200,000 employees who work in the region, because for every job in this industry in this market, there are six more jobs for the people who serve the industry or who report on it.”

Mr. Pucci believes it is vitally important that the industry’s employees not only have the training to have the right conversations with the right people, but messages have to resonate on a political level as well.

“We have an extraordinary number of challenges to overcome with the elected officials from these states,” he says. “There’s an enormous economic impact to this business that’s of great importance to these states. We have to be able to raise our visibility

in our ‘hometown.’ If the elected officials in these important regions don’t understand our mission and the value that we bring, we’ve got a problem.

“We need our employees, who are usually more scientific in nature and reticent to get involved in the political process, to step forward and care about what their elected officials think about the issues that affect our business and let the politicians know why this industry is important,” he adds.

## GETTING PERSONAL

**C**rediting much of his success to having a “thick skin,” Michael Pucci brings a unique skill set to his position as VP, external advocacy at GlaxoSmithKline.

During Mr. Pucci’s 26 years with the company, he has served as VP of sales for the Cerenex division, which launched Imitrex and Zofran in the United States. He then led GSK’s sales-training department for 10 years where he earned a CEO award and set the industry standard for new rep training and distance learning.

“My background is in sales leading up to the eventual promotion to the head of sales for the Cerenex unit,” he says. “The 10 years in sales training actually line up with my educational background. I was a biology major and I also was certified in secondary education. I was a schoolteacher before I started with Glaxo carrying a bag.”

He recognizes that what he does best is selling, training, educating, and communicating. And the ability to roll with the punches comes in handy when facing those who are the industry’s staunchest critics and are prepared to counter any data or facts he may put forth.

“I actually look forward to the tough questions,” Mr. Pucci says. “A tough question can be the transformative moment

when I can change someone’s opinion. It may not be the person with whom I might be debating; in many cases, it’s the audience members who are listening to the discussion.”

These important dialogues that enable that transformative conversation are what drive Mr. Pucci to travel the breadth and width of the country; it’s certainly not the frequent flyer miles, he jokes.

“I was so excited about this job, I literally threw my body to the wind,” he says. “I gave up my personal life for the most part, and to my detriment. I was flying home on Saturdays and going out Sundays. I was just so excited. I’m putting in more modest hours now and trying to get my balance back. But there is so much demand for information. Industry groups and associations want us to stand up and engage. They don’t want us to be silent. And I don’t want to disappoint them; the future of our industry depends on it. I cite the example of my grandmother who has Alzheimer’s, and her mother who had Alzheimer’s, which means there is a probability that I may have it someday. We have a lot of work to do. My position is: let’s not shoot the golden goose that’s working on a solution.”

One of the big rewards for Mr. Pucci is that he’s had a chance to meet some really great

people along the way and make some wonderful friends across the country.

Mr. Pucci’s list of those he credits for aiding him in his pursuits is long.

“My father is a lifetime teacher and coach and my mother is a great supporter of the family,” he says. “I had great role models growing up — a preacher, a teacher, a swim coach Dick Thatcher, and my parents.

Professionally, I am equally well-supported; Bob Ingram, vice chairman pharmaceuticals, GSK, has been a mentor, as is Chris Viehbacher, president, North American pharmaceuticals, GSK. Andy Hartsfield and his department have my back. Janie Kinney in Washington, D.C., who may be the most powerful woman in the district after Hillary Clinton, is probably one of the most wonderful leaders I’ve ever worked for in 26 years at Glaxo and I’ve had some good ones. She’s a very effective leader, supporter, and colleague.

“And then there are my two daughters and my wife, Barbara, who has been a very patient woman for the last five years.”



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## CHANGING THE CONVERSATION

The communications strategy is pretty simple, he says: getting the industry's employees to talk about why they are inspired to work in this business and backing their assertions up with facts and figures. Mr. Pucci believes some of the most important conversations are those that happen in a social context.

"Everyone in the industry has been pumped by a friend or family member for information or has been asked to provide an answer to a question or address an issue that is making news in the media," he says. "They want answers; they want our perspective. Answering those questions in a way that provides context and a message around value as to why we do what we do is the challenge. Sometimes it's important to talk about value; sometimes it's much more important to talk about access and affordability. Sometimes the conversation is about how companies are connecting with people through the industry's patient assistance program. There are a number of ways that people can respond and this is part of the training that we are providing. The industry needs to teach its employees how to answer the questions in a way that's most appropriate to the person who is asking the question."

Mr. Pucci says, first and foremost, his goal has been to keep the education simple.

"The basis for the training is to give people the data and the facts," he says. "I have found that more than 50% of the questions that are likely to arise, especially from consumers, have to do with the price-versus-value issue. So we developed a triangle formula: we put price at the top and then we draw a line to the left and we put value, and then we draw a line from price down to the right and we put we care. It's a model that everyone can remember."

Mr. Pucci says another important part of answering the price question is knowing who is doing the asking. There are two broad categories: those who have insurance and those who are advocates for the uninsured and poor.

"If talking to the former, the conversation should be about value; if talking to an advocate for the poor, move the discussion to compassion; it's important to make a connection and that they know you care on the most basic human level," he says. "Talk about how the industry has helped more than 7 million people through the Partnership for Prescription Assistance pro-

gram. We have to listen, we have to understand who we're talking to, and we have to tailor the conversation around value or compassion."

If you have been lucky enough to hear one of Mr. Pucci's presentations, you no doubt recall his favorite story about his Aunt Laurie.

"She's 78 years old and she's a pistol," he says. "At one family gathering, knowing full well that I work in the pharmaceutical industry, Aunt Laurie takes me aside and starts to complain about the cost of her Fosamax. I know she can afford the medicine, but I let her go on for a bit. And rather than debate her, I asked her if it's worth \$1.50 a day to keep her from potentially breaking a hip in a fall, keeping her out of the hospital for weeks, and pre-

venting her from potentially dying. This was the end of the conversation.

"When appropriate this is one way to put the value of medicine into context for people," Mr. Pucci says. "It's amazing how often these types of conversations pop up. And the frequency is only going to increase after the November election when I predict healthcare reform replaces Iraq as the No. 1 issue in America. I also believe, as an industry, we are in a better position than ever before to respond with a statement of value."



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**The growing body of evidence that we have at our disposal that supports the value proposition of medicine can counter any critic's ideology. But we can't sit back and assume that knowledge will disseminate itself to the population. We have to take it to the people."**

**LIFTING MORALE**

Mr. Pucci notes that employees who engage in the value conversation are energized by the fact that they have been given license to represent the business in a way that's meaningful.

"Providing employees with the answers to the questions impacts morale and, in turn, this impacts retention for the company," he says. "Within GlaxoSmithKline, of the original 400 people who we trained, we've had less than a 1% turnover in the group."

Along this line, Mr. Pucci was asked to present the value of medicine message to another industry powerhouse, harking back to the objective to be industry-centric.

"As a way to respond to the negative publicity around the industry, the human resources team at Eli Lilly called me in to address the company," he says. "They wanted to do something that would improve morale. Together with the company's senior management team, we set up an internal initiative designed to reinvigorate employees around the importance and the value of their business. When we can talk about efforts that add value to a company's purpose while acknowledging the efforts that go into discovering medicines, this is a pretty powerful message. We also instructed them on how to handle the backyard barbecue questions from the neighbors."

Mr. Pucci is encouraged to see that other companies are undertaking the initiative to educate and train their employees to be industry spokespeople.

"I understand that Pfizer is making strides, I know Dupont has been educating its employees, and Allergan is sending out materials to its employees," he says.

Getting unilateral buy-in from the top, however, is going to be an uphill battle. Some pharmaceutical company executives counter that they don't want to give their rank and file employees public-relations responsibilities because they may not get the message right.

"I don't understand this perspective," Mr. Pucci says. "We give our sales representatives hundreds of thousands of dollars of samples, a company car, and we send them out to talk to some of the most educated people in our society, who are also our customers. Not giving them the information they need to talk about our industry and to answer the questions about

the politics of the day is implausible to me."

**TALKING THE TALK**

Booked for an average of 140 presentations a year, Mr. Pucci is serious when he says he wants to get the message to the people who are engaged in the healthcare debate, to those who are involved in healthcare delivery, and to those who are critical to healthcare administration.

"We definitely want to talk to the practitioners, physician associations, pharmacy associations, nurse practitioners, physician assistants, social workers' organizations," he says.

Mr. Pucci's passion from the podium is explosive; 10 minutes in the same room with him and one becomes infused with the same determination to spread the good word. But it's more than rhetoric that is changing the opinions of even the harshest critics; it's evidence that medicines, and compliance, truly do provide value.



"Today's greatest healthcare problems are more often chronic conditions, which require ongoing, patient-centered management," he says. "While hospitalization for an acute illness may be the most effective and appropriate intervention, hospitalization for a chronic disease may represent a failure to optimize care. Yet physician and hospital care comprise 65% of the direct medical costs for people with chronic conditions. We invest too little in preventing chronic diseases or in preventing the complications that follow. The reality is that

**ALL THE RIGHT STUFF**

**MICHAEL PUCCI – RESUME**

- 2003 – PRESENT.** VP, External Advocacy, GlaxoSmithKline, Research Triangle Park, N.C.
- 2001 – 2003.** VP, Training Services — RTP Campus, GlaxoSmithKline, Research Triangle Park, N.C.
- 1995 – 2000.** VP, Commercial Operations Training & Development and Contract Sales, Glaxo-Wellcome Inc., Research Triangle Park, N.C.
- 1992 – 1995.** VP Sales, Cerenex Pharmaceuticals, Division of Glaxo Inc., Research Triangle Park, N.C.
- 1988 – 1992.** Director of Sales, Allen & Hanburys Pharmaceuticals, Division of Glaxo Inc., Overland Park, Kan.
- 1985 – 1998.** District Sales Manager, Glaxo Pharmaceuticals, Division of Glaxo Inc., Cleveland
- 1982 – 1985.** Sales Representative, Glaxo Inc., Mankato, Minn.

**EDUCATION**

**MAY 1982.** B.S., Biology, Minor Resource Management, certified to teach secondary education, University of Wisconsin at Stevens Point, Stevens Point, Wis.



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\$3 of every \$4 spent on healthcare in the United States goes to treating people with chronic diseases. To make any significant difference in managing healthcare spending, efforts must focus on the true driver of healthcare costs: chronic disease itself.”

Mr. Pucci often cites the Asheville Project as a model to illustrate that effective intervention and management of diabetes and other chronic diseases can lower healthcare costs and improve health.

“The collective body of evidence shows the value of medicine and also the value of the pharmacist and the value of a second tier of prevention — people with chronic diseases who remain compliant with their medications — can reduce costs,” Mr. Pucci says. “In addition to the Asheville model, there is the ‘10 City Challenge’ that Glaxo and Pfizer are cosponsoring in conjunction with the American Independent Pharmacy Association. This is a benefit design model that is being tested across the country; the data are going to be released this coming January.

“Basically, this information is going to change the world and it’s going to position us in the healthcare debate to talk about what’s really driving healthcare costs and where the solutions are; it’s all about better innovations, like the Asheville project,” he says. “And finally, it’s information that will change the future and how we treat diseases.”

This information, as well as soon-to-be released data from Pitney Bowes, Marriott Corp., and other employers, positions the industry to change the debate of the past — price — and focus on the future — reimbursement to the payers, including the doctors, the hospitals and the drug industry, as well as the insurance companies.

“We are in an evidence-based environment,” Mr. Pucci says. “We can talk all we want but we better have the data and the data are now here. There is a reason for excitement in 2009/2010 as we go forward with the healthcare debate; we’ve got the evidence. It’s taken a long time to get here, but it’s very clear to me that

we’ve got a better model. And there are a lot of different ways that people can apply the models and be successful, and that’s the wonderful thing.” ♦

*Editor’s Note: Mr. Pucci, in the true spirit of collaboration, generously provided PharmaVOICE with PDF copies of: Changing the Debate on Healthcare Costs in the US: The Triple Solution for Lower Cost, Better Quality Healthcare; The Value of Medicine: Introducing the Triple Solution for a Healthier America; and the Asheville Project.*



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PharmaVOICE welcomes comments about this article. E-mail us at [feedback@pharmavoiced.com](mailto:feedback@pharmavoiced.com).

## THE POLITICS OF HEALTHCARE

**IN AN EXCLUSIVE INTERVIEW WITH PHARMAVOICE, MICHAEL PUCCI, VP, EXTERNAL ADVOCACY AT GLAXOSMITHKLINE, PROVIDES HIS INSIGHTS ON HEALTHCARE AND POLITICS.**

*Do you think it’s going to matter to the industry who wins the election in November?*

**PUCCI:** I really believe that healthcare should be neither red nor blue; it’s about us as taxpayers, it’s about us as consumers of healthcare, it’s about us as humans. We need to engage with Republicans and Democrats, so I think it’s very important not to demonize one side or the other, but rather to educate both sides. And when this approach is taken, it breaks down the barriers within a company. On average, half the people in any company are Democrats and half are Republicans anyway, and the idea is not to alienate half the employee base. Our job is to educate both sides and find friends wherever they are regardless of their political affiliation.

*What do you say to those who would like to see a total overhaul of the healthcare system?*

**PUCCI:** It’s important to have a clear understanding that there are people out there who are pushing a different agenda and would like to see a socialist European-style/Canadian-style form of healthcare delivery in the United States.

We are not likely to win them over easily or ever. They are pretty stoic and they can be pretty provocative.

We know that the socialist medical systems in Canada and in Europe, first of all, are not free. In the United States, if we were to implement this healthcare model, our personal income taxes would increase by 50% to 60% to pay for it. And in every one of those countries where there is a socialist medicine model there are shortages, there are waiting lists for services, and the quality of care is inferior.

When I worked in the pharmacy at the Mayo Clinic, Canadians would come in droves to the United States to receive cancer care because



there are only two MRI machines in a single province. Upon diagnosis, it may be nine months before someone in Canada can get an MRI to confirm the diagnosis and understand the position of the tumor. Well, that’s a little too late.

The same thing happens within other treatments as well. This is the side of the story that rarely gets told when this debate is raging.

The issues that we face with the detractors to our industry align on a political affiliation that wants to change the current system to that model.