

Closing the Loop on Pharma Marketing



Adoption of closed loop marketing techniques has been slow, but new drivers are propelling pharma companies to rethink and update their CLM strategies.

The emergence of the iPad and similar tablets has paved the way for increasing use of closed loop marketing (CLM) throughout the pharma industry. These nimble, real-time devices enable the industry to tailor presentations, gather feedback, analyze data, and reconfigure approaches on the fly. The new technology is one major reason that CLM is gaining traction, but there are still many challenges to be faced before the pharma industry's adoption is on par with other industries.

According to Veeva Systems, CLM, which initially came to prominence in the financial and retail industries, has been part of the marketing tool kit in the pharmaceutical industry for about 10 years. In comparison with some other industries, CLM adoption within pharma was initially very slow for a number of reasons, such as restrictive, non-mobile hardware, and over-engineered software applications that did not seamlessly connect the customer information with content management systems.

"However, over the past few years, CLM adoption has progressed dramatically," says Paul Shawah, VP, commercial strategy, at Veeva. "One of the reasons for the sudden upswing is the introduction of tablet devices, particularly the light weight Apple iPad with its long battery life, and more recently the Microsoft Surface devices, which have solved the hardware problem."

Tablets are being designed to consume content, and are therefore best suited for a CLM solution.

"However, a successful CLM project needs much more than just a good device," says Neeraj Singhal, VP, product innovation, Cegedim. "CLM needs content that is designed thoughtfully, taking into consideration the mindset, concerns, and potential questions of the audience. The content needs to preempt questions, and drive discussion via slick navigation built into the content. Last but not least, a powerful viewer is needed — one that can serve content and enable switching between and across content pages seamlessly and with sub-second response time."

Mr. Singhal adds that before the new tablet era — pre-2010 — suitable technology wasn't available for content consumption in a manner that enabled collaboration and discussion between healthcare professionals and field users. But with the emergence of iPads and Windows 8 tablets, it's now a different world.

However, technology isn't the only CLM driver. According to

Morten Hjelmsoe, CEO and founder of Agnitio USA, the fact that the industry is being forced to change its business model is another factor.

"The pharmaceutical industry has to change the way it works," he says. "Up until now, companies sold pills. In the near future, the market will be much more outcomes driven and the industry will get paid when the treatment works. In the past, for example, if a company was in the diabetes market, its revenue relied on how many pills or how much insulin it could sell. Very soon, companies will get paid only when their products show positive health outcomes."

"If, however, those positive outcomes cannot be proven then companies are not going to get paid, so that ultimately means the industry needs to get a lot closer to each individual doctor and patient," Mr. Hjelmsoe continues. "And with the new technology, companies have the ability to individualize the message to solve individual needs."

The industry is familiar with customizing messages for physicians, but with the flexibility of new software and tablets, it is time to take it up a notch.

"The industry has always maintained an individually focused approach through knowledgeable sales professionals who are increasingly akin to — if not in actuality — account managers as well as a wide range of relationship marketing tools and technology," says Anna McClafferty, senior VP, TGaS Advisors, practice leader, executive commercial operations. "These successful CRM approaches will continue to evolve in sophistication and in precision, and they will be at the heart of engag-

"The pharmaceutical industry is significantly behind other industries in creating true closed loop marketing."

SHANNON HARTLEY / Rosetta



“The industry needs to get a lot closer to its doctors and patients, and with new technology it has the ability to individualize the message to solve each individual need.”

MORTEN HJELMSOE / Agnitio USA



ing HCPs over the next five years, especially as payer influence and integrated healthcare networks grow in importance.”

But before a company runs out and buys iPads for everyone, it must first revamp its strategies. Technology won't help if the same old approaches are being used.

“Before updating the technology, a company needs to update its thinking,” Mr. Hjelmsøe says. “Implementing the technology doesn't change behaviors. CLM is more about having a strategy that technology can help enable. A clear strategy must come first, and then a company can choose the technology that best fits the objective. What's happening now is that companies are deciding to use software or technology to do more faster, but if what they did before didn't work, it's not going to work any better just because they can do it faster. In other words, if a physician is tired of paper-based marketing campaigns and the same push campaign is just switched to digital, then digital becomes an amplifier, not a solution, and will be no more effective.”

Mr. Hjelmsøe estimates that at least 80% of the industry is using some type of digitalization, but no more than 5% of companies are actually using it as an interactive pull mechanism.

“For example, all big pharma companies in America have gone digital, but they are still doing the same four campaigns a year, using the same push messages, and not fully using what the technology has to offer,” he says. “Very few have crossed that bridge.”

There are a few true company leaders in the industry that are starting to integrate activities to equip sales reps for HCP interaction by understanding how the HCP has engaged with other marketing programs, but there is still a lot of work to be done in this area, says Shannon Hartley, managing partner, healthcare vertical, Rosetta.

“The pharmaceutical industry is significantly behind other industries — financial services, technology, and even consumer packaged goods — in creating true closed loop marketing,” she says. “The pharma industry has adopted basic relationship marketing programs, but companies tend to keep to the traditional silos of personal for sales rep versus relationship marketing for nonpersonal promotion.”

Some companies have tried to implement a CLM strategy, only to be disappointed by the results. When it comes to CLM for customizing direction and content of brand messages, the industry has actively and creatively experimented and, to date, has largely been

CLM and eDetailing Are Not the Same

In the pharma industry, eDetailing and closed loop marketing are terms often misunderstood as being synonymous. However, eDetailing is really just one part of the CLM process. eDetailing is simply a more interactive way to sell by using electronic sales materials, whereas CLM is the process of using an eDetailing tool to not just sell, but to also capture insight about the sales call, such as what content is accessed most often and is most effective. Those captured data are then aggregated and provided back to the marketer who analyzes against key metrics, such as key message objectives by segment, and then refines the messaging to reflect those learnings and close the loop.

Source: Veeva Systems.
For more information, visit veeva.com.

underwhelmed by the results, Ms. McClafferty says.

“Over the past few years, senior commercial operations leaders at our TGaS client summits have expressed disappointment in CLM,” she says. “They have found that the potential of CLM technology and investments are often not yet realized. Despite the promise of real-time guidance, sales representatives are up against the reality of declining physician access and all-too-brief meetings.”

Nonetheless, when TGaS asked leaders representing 26 companies to rate the relative importance of building multichannel marketing expertise in 2013-2014, they rated it 4.6 on a 6-point scale. Large-tier companies ranked it higher.

Another challenge is that it is very difficult, if not impossible, to measure and derive insights from CLM feedback loop. When people scrutinize the data for what is and isn't working, they find a great deal of noise, or worse, obvious answers. In particular, efforts to use information regarding messages, content, and message flow to learn how better to engage HCPs have not been fruitful, and most companies have abandoned this costly CLM application.”

Mr. Singhal says three elements need to be considered in any effective CLM program, and they are: the content, the viewer, and the insights gathered from data to close the loop.

“These three things need to work seamlessly in tandem to have an impact on the business,” he says. “CLM enables marketers to ob-

Study Shows Pharma in Early Stages of CLM

The TGaS Advisors Current State of Commercial Operations 2013 Landscape Benchmark report confirmed that, despite reservations, companies are in the early stages of deploying advanced CLM capabilities.

Where iPads are used, many of the 16 participating companies reported they track clicks, learn which HCP has seen brand information, find out the elapsed time for information display, and collect answers to survey questions. However, almost all of these companies report they have yet to use the information to improve the impact of promotion. Many also report challenges in convincing reps this information is being used to improve promotion versus to “keeping a Big Brother eye on the field.”

The study also showed that the most prevalent uses of system-driven information to the field include providing reps with customized managed care coverage information and supporting medical information answers to HCP questions. Less than half of companies half support iPad integration with other services, such as triggered emails to HCPs, follow-up requests, sample requests, and connections to medical affairs staff. To date, very few companies provide system-driven direction regarding what to show an HCP during a sales call.

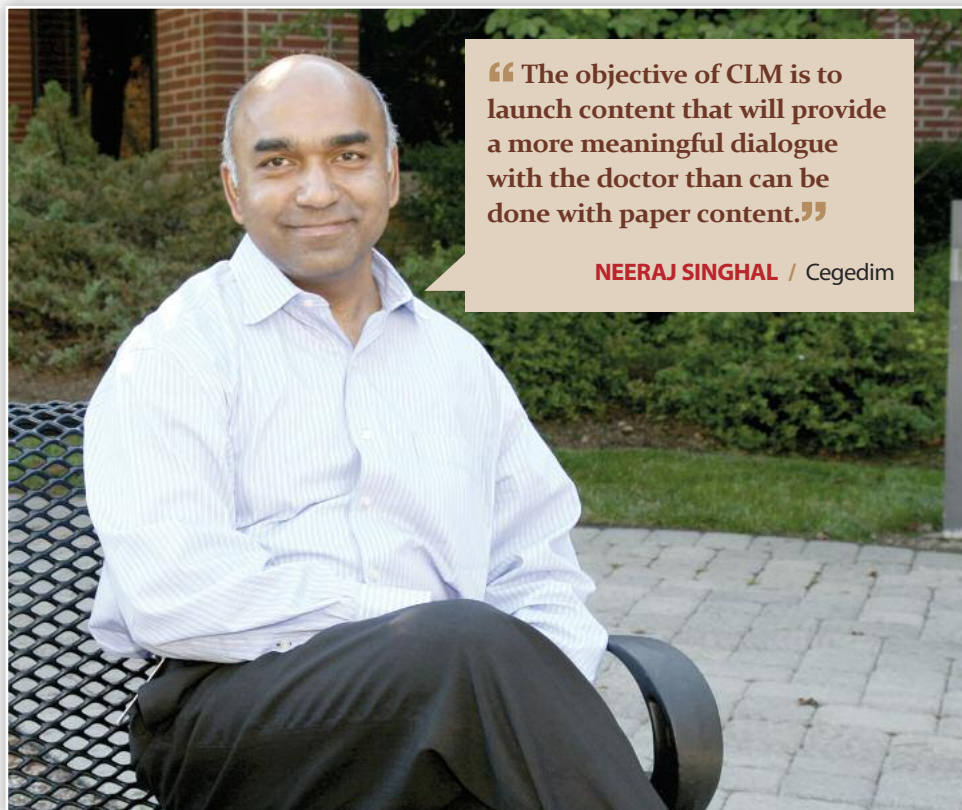
The study also found that:

- » Half of respondents have a feature to show custom managed care coverage
- » Only three of 16 companies surveyed use systems-driven targeting information to decide what to show an HCP
- » Seven out of 16 can get HCP answers to a question
- » Less than half support integration with other services

Source: TGaS Advisors.
For more information, visit tgas.com.

jectively understand customers better — through the responses to and discussions around the content being presented to them.”

Pharma has been learning from its mistakes, says Mr. Shawah. Early failed CLM pilots have provided new insights into critical



“The objective of CLM is to launch content that will provide a more meaningful dialogue with the doctor than can be done with paper content.”

NEERAJ SINGHAL / Cegedim

success factors making today's solutions more effective. Another driving factor is the cloud. New integrated applications based on multi-tenant cloud technology have dramatically simplified both the user and the physician experience while also making multichannel CLM possible at a much lower cost.

“CLM is finally evolving as the standard in the industry,” he says. “Many companies are still figuring out the difference between e-detailing and CLM. These terms are often misunderstood to be synonyms. The innovators are making better use of the data and insights that CLM can deliver and applying them to their brand promotional strategy.”

The Cloud at Work

New cloud-based technology overcomes the age-old, pervasive barriers to effective CLM, such as changing regulatory processes and disconnected systems, and instead seamlessly links content creation, content delivery, and content feedback for fast creation, approval, and distribution of content to HCPs. Over the next five years, most companies in the industry will have dramatically simplified their internal processes and integrated their systems to enable the true speed and pace of business that CLM can deliver.

Consequently, a growing segment of life-sciences companies has, in fact, finally closed the loop. Over the next five years, this trend will continue to grow quickly. The companies

that can adapt their marketing and sales approach based on each customer's unique needs — provided by CLM — will have the competitive advantage, Mr. Shawah says.

Ms. Hartley notes that as HCPs become more focused on patient outcomes and have less time for sales reps, the industry will have to adopt true CLM.

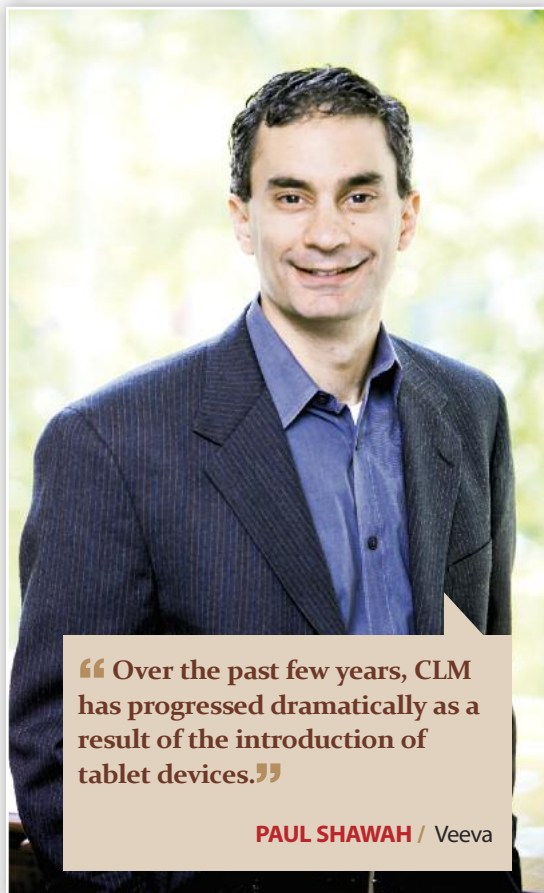
“In five to 10 years I expect better integration of all information through more personalized insights and richer data about customers that lead to true personalized marketing,” she says. “Technology can enable this today, but I anticipate that it will take several years for pharma to truly adopt this personalized marketing approach.”

Meeting CLM Challenges

Despite the challenges and the industry's reservations surrounding CLM, reports show that companies are inching forward, and are paying attention to pilots and reviewing what other industries have done successfully.

“It's not so much a question of whether pharma is behind other industries,” Ms. McClafferty says. “Pharma is simply not playing in the same ballpark. The pharmaceutical business commercial model is unique and complex. And the relationship with the HCP customer is not transactional in the same way that customer interactions are for other industries, like financial services and CPG.”

Many intermediaries and stakeholders



“Over the past few years, CLM has progressed dramatically as a result of the introduction of tablet devices.”

PAUL SHAWAH / Veeva

stand between biopharma firms and their end consumer — the patient — and appropriate promotional practices and respect for the HCP-patient relationship are of paramount importance. In addition, depending on the prevention, disease, or treatment area of interest, CLM viability can vary dramatically. These are just some of the factors that make the design, implementation, and impact of CLM uniquely challenging, Ms. McClafferty says.

The challenges of applying a successful CLM program emerge across all functions in the organization, including sales, IT, marketing, legal, regulatory, and even training.

“Successful CLM requires alignment and collaboration across all stakeholders,” Mr. Shawah says. “Each stakeholder group has its individual challenges and critical success factors, but CLM success is really the sum of all the parts and broader than each group doing its individual part.”

He adds that for many companies, the biggest challenge beyond basic blocking and tackling is getting the organization to look at CLM as part of a holistic customer communication strategy. It should not be considered a standalone or a static channel. It is dynamic by nature and must change to meet changing customer needs over time.

Starting with the sales organization, a typical challenge is getting the field users on-board with the CLM project. Getting their

buy-in should start with discussions around the objectives of CLM, and how CLM can help them and the company achieve their objectives. Appropriate training helps field users assess and understand how CLM can improve their effectiveness, and helps them be more responsive to questions, thereby enabling them to build better relationships with their customers.

“Some field users may suspect that CLM is a tracking tool, so appropriate discussions need to happen to allay these concerns, and have higher adoption,” Mr. Singhal says. “Field users need to understand the customer engagement process and the advantages that CLM brings to them, because without their buy in, this investment will not yield the desired results.”

A TGaS mini-benchmark study conducted last fall indicated that field force resistance to CLM is typically based on system reliability issues and ease of use for the end user.

“According to Curt Staab, VP of our sales advisory practice, sales leadership is often challenged with convincing the salesforce of the value of CLM,” Ms. McClafferty says. “Reps may also be concerned that ‘Big Brother’ is watching them, not the customer, and that every click in the CLM software is time-stamped and used to measure if the reps are working a full day, or physically where they say they are in their call reporting.”

Successful CLM rollouts have included pilots that help develop advocates within the salesforce. These advocates in turn can sell the benefits of using CLM to their nonpilot peers before the full rollout.

Ms. McClafferty adds that TGaS has observed a wide variance on how CLM metrics are used and communicated to the field.

“Some companies are concerned that if any metrics are reported to the field on utilization, the Big Brother concern will dampen enthusiasm for CLM,” she says.

Mr. Hjelmsoe also has witnessed some pushback from clients and their reps when it comes to using iPads. While some of that may be due to sales reps not feeling comfortable with their actions being tracked, he thinks it’s more that the tablets are not being utilized to the best of their ability. He has observed many companies using the same content and strategies on new technology.

“When the technology first became available, the industry used the new technology and applied old methodology; it didn’t do anything new,” he says. “On the contrary, it started to use the iPad as an amplifier and just pushed even harder with new tools.”

The new tools should be used for opportunities to become customer centric and this

will encourage and motivate reps to use the iPads.

“They have to use the technology to implement something new to keep them engaged; you can’t just hand them an iPad with the same material they had before,” Mr. Hjelmsoe says.

Ms. McClafferty says TGaS had the same finding.

“We also found, not surprisingly, that simply digitizing paper marketing assets does not work as well as creating interactive, active digital materials,” she says.

“The objective is to launch content that will provide a more meaningful dialogue with the doctor and will enable a greater understanding of the doctor’s process, which cannot be done with paper content,” Mr. Singhal says. “If the content is not good, the viewer could be the best possible viewer in the world but the entire exercise is a waste. Pharmaceutical companies that use the same

Study Shows CLM Growth

Pharma companies have been investing in CLM since as early as 2005 and it is now widespread throughout the industry.

However, in most cases the reality falls well short of the vision. Although most companies collect feedback on their interactions, many have not segmented their customers well enough to target individual physicians based on the feedback gathered. Others cannot process the feedback data fast enough to create personalized marketing approaches or cannot connect different parts of the organization together well enough to put the personalization into practice.

In a recent benchmarking study, Capgemini Consulting interviewed 14 pharma companies in the United States and Europe about CLM. Of these, 11 said they were at some stage of a CLM transformation. More than 60% of the industry stakeholders interviewed listed “better engaging customers” as the main driver for implementing a CLM program. This shows the industry clearly understands that while CLM can ultimately drive top- and bottomline outcomes, its primary goal is to improve customer relationships by providing a unique, relevant experience.

Source: Capgemini Consulting.
For more information, visit capgemini.com.

content for digital as they do for print will never be successful.”

Through CLM, the industry has the ability to improve sales rep performance by turning the model around to a pull model, using interactive devices for presentations.

“If the industry turned its rep model around from push to pull, it would have enormous potential and could get so much more value out of its reps,” Mr. Hjelmsoe says. “Companies need to keep in mind that in most countries about 70% to 90% of the information that physicians receive comes through the sales rep, so empowering the reps is crucial if full advantage is to be taken of the technology.”

Another major challenge on the sales side is orchestrating the best customer interaction by ensuring the content and messaging is on target based on each customer’s unique needs and the preferred channel.

The CLM flow should be similar across all products being promoted and sales operations need to be responsible for understanding the reps’ experience in using CLM and all other field technology. Sales operations may also be responsible for developing high-level user metrics to inform sales leadership about the use of CLM.

Marketing Challenges

For marketing, the challenge will be getting the team to view CLM as another important channel in the marketing mix and investing the corresponding amount of resources to match the value and preferences of different customer segments, Mr. Shawah says. Also, there will be a learning curve with trying to mine customer insights from CLM data and then to adapt the overall marketing approach based upon this new information.

According to Mr. Singhal, the industry has not moved ahead with the analysis of responses and other data gathered during the CLM process, and companies need to develop better mechanisms for analyzing data to generate valuable insights to close the loop.

“The industry needs to use the information that is gathered in a responsible and meaningful way,” he says. “Having a set of clearly defined business objectives is vital for the success of any CLM program because, without that, the large volume of data generated by CLM will drown the program. One needs to know what to look for. Companies that have well-defined objectives for CLM will achieve the best results.”

Marketing silos and organizational structure are also primary barriers to CLM. The

“Successful CLM approaches will continue to evolve and be at the heart of engaging HCPs over the next five years.”

ANNA MCCLAFFERTY / TGaS

biggest barrier, however, is created by traditional organizational structures that focus on marketing medium — sales, digital, relationship marketing — instead of the customer.

“Teams that focus and organize around the medium, for example, personal and nonpersonal marketing, instead of the customer and customer needs are a core barrier to adoption,” Ms. Hartley says. “Customer-centric marketing uses a holistic approach that uses all marketing mediums and personalized messages to address unique customer needs and interactions.”

Market research needs to adapt, as well, to be more comfortable and adept at using a wider variety of customer data and integrating that data with real-time insights and analysis to more effectively drive programs and insights, she says.

“Too often, the systems and analytics plans are done a couple of times a year to read program ROI and adjust marketing plans,” Ms. Hartley says. “True CLM success will come with closer to real-time analysis and program optimization.”

The marketing function has some of the biggest challenges in terms of changes that need to be made. In the past, company marketers sitting in New York may have decided what messages were delivered to physicians around the world. For example, they decided what was going to be said in a face-to-face meeting with a doctor in Ecuador. The problem with that scenario, Mr. Hjelmsoe says, is that a person can be a very good marketer in New York but have no idea what the local problems are for physicians in Ecuador.

“Technology can give more freedom to the salesforce by providing sales reps with a whole repository of tools to individualize what content to use for each customer,” he says. “This would be a very big switch from the way the industry is doing it now.”

Challenges in IT, Legal, Regulatory, and Training

Challenges of CLM even extend to the IT, legal, and training departments. For IT, the challenge will be finding a way to seamlessly



integrate all of the insights from other channels with the CLM system or data.

With today’s cloud-based applications, this level of integration across the entire commercial IT landscape is now a reality, Mr. Shawah says.

For legal and regulatory, the key will be to match the speed that CLM enables, specifically, the speed of approvals required for a digital world.

And finally, when it comes to training, this group must learn to adapt its methods to extend beyond just one-time product training to dynamic, ongoing training that evolves over time based upon evolving customer needs that are now better understood, thanks to CLM.


As pharma begins to harness the power of CLM in its sales organizations, it should be looking toward a future where all phases of its business are improved by closing the loop. Benefits to sales are obvious: increased face time and improved prioritization and targeting of messages through greater understanding of customers. Marketers will gain a greater understanding of which messages are working, and be able to collect data for improved segmentation criteria. Even HR and IT will gain value from tracking and analysis of data. (To read more about additional benefits, access our exclusive bonus content.)

The technology exists for all this to happen today, but it may take some years before the industry can make the paradigm shift to total CLM. **PV**



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Pharma Slowly Realizing Benefits of CLM

Adoption of closed loop marketing techniques has been slow, but new drivers are propelling pharma companies to rethink and update their CLM strategies.

Once the challenges are met, there are many benefits to CLM for the industry. CLM has the power to dramatically increase the quality of the customer interaction by providing the right content, messaging, and service level for the right customer based on his or her needs. The key here is relevance, and the key benefit is improved sales performance, says Paul Shawah, VP, commercial strategy, Veeva. By conducting more relevant sales calls with customers, overall sales effectiveness improves dramatically.

Shannon Hartley, managing partner, healthcare vertical, at Rosetta, calls true CLM efforts personalized marketing, as it more efficiently delivers the right message to the right target audience. The ability to personalize both medium and message and quickly measure results makes a pharma product and sales organization more relevant and useful to its target audience.

"The best sales reps have always done this type of personalization; however, integrated CLM brings that particular expertise to a much wider range of both sales and marketing teams," she says.

Additional benefits include richer customer insights, the ability to capture information about preferences that can be used for future interactions, increased agility with the ability to understand trends and update messaging to reflect those trends — all of which allows marketing and sales to change their messaging, strategies, and timing ahead of the curve. Sales efficiency can be increased, especially when linked with the CRM system. CLM reduces the time to prepare for and record sales calls, enabling sales to focus on what's most important — the customer.

“Most firms are just beginning to implement CLM based on the single point of contact with customers via sales representatives. However, there are vast opportunities to continue the conversation through multiple channels.”

MORTEN HJELMSOE / Agnitio USA



These are benefits that can be achieved even if CLM is operated as a standalone channel, but are magnified when implemented as part of a broader, multichannel customer engagement strategy, Mr. Shawah says. For example, when used alongside other relevant and valued interaction channels as a way to provide HCP self-service, a customer can continue her sales dialogue in the virtual world, right where the sales rep left off in the physical world.

According to Morten Hjelmsoe, CEO and founder of Agnitio USA, most firms are just beginning to implement CLM based on the

single point of contact with customers via sales representatives. However, there are vast opportunities to continue the conversation through multiple channels, such as physician Web portals, video details, email and websites, medical inquiries, virtual communities, call centers, and meetings or conventions. Mr. Hjelmsoe believes that multichannel outreach is crucial in delivering the right knowledge at the right time, as well as achieving coordination across the different channels.

"The interaction should be seamless, similar to eBooks; if I'm reading my book on one

Case Study: Merck Sharp & Dohme UK Improves Rep Effectiveness with CLM

Merck Sharp & Dohme (MSD), the UK subsidiary of Merck, had been struggling to find a replacement CRM solution for its 16-year-old custom-built system. It tried a client/server CRM system, but that failed to meet the company's needs. Specifically, the company was looking for a CRM solution with innovative mobile capabilities for e-detailing and sophisticated analytics. On a larger scale, MSD had visions of implementing a uniform CRM platform across all of Europe that would be capable of growing with the company into the future.

In the United States, Merck had recently implemented Veeva's iRep for the iPad and MSD UK was ready to consider the cloud-based solution in Europe. MSD conducted a highly structured proof-of-concept project with its 100-plus person immunology team in the UK and in just 10 weeks, MSD's pilot team was live on the CLM tool. MSD meticulously evaluated the system before, during, and after the proof-of-concept project to determine the CLM system's real impact on the organization. Overall, almost 70% of users reported that it contributed a high or very high value to their daily workday. Surveys found that reps' overall effectiveness of planning improved by 118% compared with the previous system. Eighty-two percent of users are accessing the new CRM system in the field compared with only 23% previously. Because of these positive results, MSD reports it plans to roll out the CLM system in multiple European markets, including its top five largest markets.

Source: Veeva. For more information, visit veeva.com.

“CLM's impact is significantly magnified when it enables field users to seamlessly access and share clinical and promotional content during discussions with customers.”

NEERAJ SINGHAL / Cegedim

device while on an airplane, and later open it on another device in the taxi, it will open in exactly the same spot where I left off,” he says. “With multiple channels in play, sales reps can do the same by encouraging physicians to access a customized microsite after the face-to-face meeting.”

CLM's impact is significantly magnified when it enables field users to seamlessly access and share clinical and promotional content during discussions with customers, says Neeraj Singhal, VP, product innovation, at Cegedim.

And the proof is in the pudding; one pharma company reports it is realizing significant benefits through its CLM program. Merck Sharp & Dohme in the UK, reports it has improved call planning effectiveness by 118% with an integrated iPad CRM/CLM platform.

One area where individualized customization is most likely to reap benefits is how and when HCPs wish to engage with biopharma companies, as well as how and when they are most receptive to biopharma promotion, says Anna McClafferty, senior VP, TGaS Advisors, practice leader, executive commercial operations.

“Many companies have implemented successful programs that accomplish this customization, not so much for high prescribers but for specific customer segments where access is a challenge and/or for specific brand situations,” she says. “Redoubling efforts to ensure that all pertinent information about customers is maintained and used within flex-

ible CRM systems, and that marketers fully leverage the power of these systems, are keys to future success.”

Also critically important is the ongoing effort to link individual prescribers to influencers — other prescribers, IHN accounts, and payers — within these CRM systems, she adds.

Companies that view CLM as a tool, not a strategy, will be more successful, she says. Development of CLM standards for best practices and efficiency must be balanced against the likelihood of a one-size-doesn't-fit-all model. Experimentation and applying logic, especially given the unique pharma business model, are important keys to ensuring that CLM concepts are “pharma-fit,” Ms. McClafferty says. 